

AC 4624
BURGH OF GREENOCK.



REPORT

ON THE

Health of the Burgh

FOR THE YEAR 1930.

BY

ALEXANDER JOHNSTONE, *M.C., M.A., M.D., D.P.H.*

MEDICAL OFFICER OF HEALTH.

Report furnished to the Burgh Council by the Medical Officer of Health.

GREENOCK:

PRINTED BY J. STORER & SONS, 41 CHILDELAN STREET.

1931

BURGH OF GREENOCK.



REPORT

ON THE

Health of the Burgh

FOR THE YEAR 1930

BY

ALEXANDER JOHNSTONE, *M.C.*, *M.A.*, *M.D.*, *D.P.H.*

MEDICAL OFFICER OF HEALTH.

LIST OF STAFF.

Medical Officer of Health.

Alexander Johnstone, *M.C.*, *M.A.*, *M.D.*, *D.P.H.*

Assistant Medical Officer of Health.

Dorothea I. Baird, *M.B.*, *Ch.B.*, *D.P.H.*

Health Visitors.

Joan M. Pollok.

Mary Duncan.

Mrs Jessie Macfarlane.

Jean Wood.

Mrs Jessie Gillespie.

In addition, all the Nurses of the Greenock and District Nursing Association act as part-time Health Visitors under the Maternity and Child Welfare or Tuberculosis Schemes.

Public Health Staff.

John McCrone, Epidemic Inspector.

Minnie Sinclair.

Elsie C. Greenham.

Helen C. Bog.

Margaret C. MacElwee.

Ella S. Sloan.

Maternity Hospital.

Dorothy F. Wells, Matron.

Resigned 29th October.

Edith M. Crump, Matron.

Took up duty 1st January, 1931.

Elizabeth Moles.

Alice Logan,

Marion Currie,

Resigned 29th March.

Took up duty 31st December.

Venereal Diseases Special Treatment Centre.

John Carson, Orderly.

Disinfecting Station.

Patrick O'Kane, Station Disinfecting Officer.

Daniel McLean, District Disinfecting Officer.

Reception House.

Barbara Byle, Matron.

Part-Time Officers.

James Laurie, *M.B.*, *C.M.* }

John Miller, *M.B.*, *Ch.B.* }

Surgeon-Accoucheurs.

Randolph Douglas, *L.D.S.*, *D.D.S.*, *L.R.C.P.*, Dental Surgeon.

TABLE OF CONTENTS.

	Page.
VITAL STATISTICS—	
Population,	7
Births and Birth-rate,	7
Infantile Mortality,	7
Deaths and Death-rate,	8
Causes of Death,	8
Statistical Comparison of Districts,	11
INFECTIOUS DISEASES—	
Measles,	11
Whooping Cough,	12
Scarlet Fever,	12
Diphtheria,	12
Pneumonia.	13
Enteric Fever,	13
Chickenpox,	13
Cerebro-spinal Meningitis,	14
Smallpox,	14
Puerperal Fever and Pyrexia,	14
PULMONARY TUBERCULOSIS,	16
NON-PULMONARY TUBERCULOSIS,	19
ALL TUBERCULOSIS,	22
MATERNITY AND CHILD WELFARE SCHEME,	23
MIDWIVES (SCOTLAND) ACT,	36
VENEREAL DISEASES,	38
HOSPITAL ACCOMMODATION AND AMBULANCE ARRANGEMENTS,	41
OUT-PATIENT FACILITIES,	46
MEDICAL CARE AND NURSING OF THE SICK POOR,	46
DR. LEGGETT'S ANNUAL REPORTS,	48
BACTERIOLOGICAL EXAMINATIONS,	56
SERA, VACCINES AND INSULIN,	57
PORT SANITARY ADMINISTRATION,	57

	Page.
DISINFECTION,	59
RECEPTION HOUSE,	59
MILK AND DAIRIES,	60
MEAT INSPECTION,	61
HOUSING AND TOWN PLANNING,	61
FACTORIES AND WORKSHOPS,	63
WATER SUPPLY,	64
DRAINAGE,	64
RIVERS POLLUTION,	64
NUISANCES,	64
METEOROLOGY,	64
PROPAGANDA,	65

APPENDIX TABLES.

(I.) Vital Statistics,	66
(II.) Causes of Death—Registrar General,	67
(III.) Causes of Death—Public Health Districts,	68
(IV.) Population and Principal Rates per 1,000— 1881-1930,	69
(V.) Sources of Notification of Infectious Diseases,	70
(VI.) Monthly Incidence of Infectious Diseases,	71
(VII.) District Incidence of Infectious Diseases.	72
(VIII.) House Incidence of Infectious Diseases,	73
(IX.) Monthly Incidence, etc., of Measles, and Whooping Cough,	74
(X.) Infectious Diseases Rates, 1900-1930,	75

To the Department of Health for Scotland,
and the Local Authority of the Burgh of Greenock.

LADIES AND GENTLEMEN,

I beg to submit the Annual Report on the Health and Sanitary Condition of the Burgh for the year 1930.

The only epidemiological event of importance was the prevalence of measles in the community during the first half of the year. The disease, however, was happily of comparatively mild type.

Statistically 1930 was notable in that it completed a quinquennium in which the average birth-rate, general death-rate, infantile mortality rate, and tuberculosis death-rates were all lower than in any previous five yearly period.

The passing of the Parish Council brought the department into close touch with the medical work carried out under the Poor Laws, and a certain amount of new material has accordingly been introduced into the report.

I again wish to thank the staff of the department for their loyalty and ungrudging assistance, and my colleagues in the Corporation for their unfailing co-operation throughout the year.

I am,

Ladies and Gentlemen,

Your obedient Servant,

ALEXANDER JOHNSTONE.

Medical Officer of Health.

STATISTICAL SUMMARY.

1930.

Population as estimated at the middle of 1930,	82.131
Acreage of burgh,	3.170
Density of population per acre,	25.90
Birth-rate,	23.0
Illegitimate birth-rate per 100 births,	5.3
Marriage-rate (uncorrected),	6.5
Death-rate—all causes,	13.7
Death-rate—all tuberculosis,	1.18
Death-rate—tuberculosis of respiratory system,	0.88
Death rate—non-pulmonary tuberculosis,	0.30
Death-rate—principal epidemic diseases,	0.89
Infantile mortality rate,	96.

All rates given are corrected for transfers.

PUBLIC HEALTH DISTRICTS

-
- A—EAST DISTRICT—corresponds to municipal wards Nos. I., II., and III.
- B—EAST CENTRAL DISTRICT—corresponds to municipal wards Nos. IV. and V.
- C—WEST CENTRAL DISTRICT—corresponds to municipal wards Nos. VI. and VII.
- D—WEST DISTRICT—corresponds to municipal ward No. VIII.

Medical Officer's Report

for the Year 1930.

VITAL STATISTICS.

POPULATION.—The Registrar General's estimate of the population of the burgh to the middle of 1930 was 82,131, and this figure has been used as the basis for all statistical calculations.

This number indicates an increase of 287 on last year's figure, but is only four in excess of this department's population estimate for the year 1929. As usual, the number of occupied houses in the burgh was used during 1930 as a basis for population estimation and would indicate a figure in the region of 83,804. The census, however, falls to be taken during 1931.

The natural increase of population (i.e. excess of births over deaths) was 763. This is an increase on last year's figure of 544, but is still below the average for the past ten years, namely 875.

BIRTHS AND BIRTH-RATE—The number of births registered during 1930 was 1,878. This number on correction becomes 1,888 (938 males and 950 females), and the equivalent rate is 23.0. The figure last year was 22.2, and the average for the last five years is 23.38. Tables I. and IV. give further information in this connection.

INFANTILE MORTALITY.—The number of deaths of children under one year of age was 181, a decrease on last year's figure of 202, and lower than the average of the last ten years, namely 221. The corresponding infantile mortality rate is 96, which is a reduction on last year's figure of 111, and lower than the average of the last five years, namely 103.

This comparatively low figure occurring in a year in which measles was epidemic, is very gratifying, but it is not possible to form any accurate explanation of its occurrence. It is to be hoped, however, that it is the beginning of a continued decrease in the infantile mortality rate of the burgh, which has for long been maintained at a high level.

Atrophy, debility and marasmus were responsible for 24.86 per cent. of the total infantile deaths, premature birth 16.57 per cent., pneumonia 16.02 per cent., diarrhoea and enteritis 7.73 per cent., bronchitis 6.08 per cent., measles 5.52 per cent., convulsions 4.97 per cent., and whooping cough 3.86 per cent.

DEATHS AND DEATH-RATE.—The number of deaths registered in the burgh was 1,142, and the gross death-rate is 13.9. When corrected for transfers the figures become 1,125 (614 males and 511 females) and 13.7 respectively. This rate is considerably lower than last year, and is also below the average for the last five years, namely 14.56. The average age at death was approximately 51 years.

CAUSES OF DEATH.—The following were the chief causes of death during 1930:—Malignant tumours 111, heart disease 104, pneumonia (all forms) 104, tuberculosis (all forms) 97, apoplexy 92, diseases of early infancy and malformations 87, and bronchitis 68. Tables II. and III. give further information regarding these deaths, which may be conveniently grouped as follows:—

Principal Epidemic Diseases.—These diseases were responsible for 73 deaths during the year and this produces a death-rate of 0.89, which is slightly above last year's figure of 0.85, but below the last quinquennial average 0.97.

In this group the chief causes of death were measles 28 (10 in children under one year), diarrhoea and enteritis 18 (14 in children under one year), whooping cough 15 (7 in children under one year). Scarlet fever caused 7 deaths, and diphtheria 5.

Other Epidemic Diseases.—This group produced 32 deaths, which is equivalent to a death-rate of 0.38. Influenza was responsible for 20 of these; it was the sole cause in 2, was complicated by pneumonia in 7, by bronchitis in 7, and by other causes in 4. Paratyphoid B. fever was responsible for 4 deaths, cerebro-spinal meningitis for 3, encephalitis lethargica for 2, and erysipelas, dysentery and malaria for 1 each.

Tuberculous Diseases.—During the year the number of deaths from pulmonary tuberculosis was 72, and the corresponding death-rate 0.88. This rate is considerably lower than last year's figure of 1.04, and slightly below the last five yearly average 0.90. Reference to Table IV. will show that the death-rate from pulmonary tuberculosis has been for many years pursuing a steadily downward course. Tuberculosis of the meninges, abdomen and other organs caused respectively 15, 4 and 6 deaths, and the non-pulmonary rate is 0.30 as against 0.26 in 1929, and 0.38 the previous quinquennial average. This is the second lowest non-pulmonary rate on record in the burgh, and there seems little doubt that it will become progressively smaller as years go on.

The total tuberculosis rate, therefore, is 1.18 which is consider-

ably lower than last year's figure of 1.30, and is also below the average for the last five years, namely 1.30. Further information will be found on Table IV.

Pneumonia.—The deaths from this cause numbered 104, and the death-rate is 1.26. Those of broncho-pneumonic type amounted to 61, of which 44 occurred in children under the age of five years. Of the unspecified forms 7 occurred in children under five, and about half the total were in persons over 45. Last year's rate was 1.71, and the average for the past five years is 1.53.

Bronchitis.—This condition accounted for 68 deaths, and of these 15 were in children under the age of five, while 43 were in persons over 45. The death-rate is 0.82 as against 1.14 last year, and the previous quinquennial average is 0.91.

Other Respiratory Diseases.—These deaths numbered 13, and were classified by the Registrar General as follows:—Pleurisy 4, congestion of lung 3, asthma 2, others 4.

All Respiratory Diseases.—The number of deaths from respiratory conditions, apart from tuberculosis, was, therefore, 185, which figure gives an equivalent death-rate of 2.25. These figures are considerably below those of 1929, which were 250 deaths and a rate of 3.05. The average number for the last ten years is 221.

The majority of these deaths occurred during the periods January to May and October to December, with the largest numbers in February and December.

Cancer.—The mortality due to malignant tumours was 111 deaths (48 males and 63 females), and the death-rate is 1.35. The organs of the body principally affected were as follows:—Stomach and liver 42, bowel 26, female genital organs 10, breast 8.

The number of deaths from cancer last year was 120 and the rate 1.46. This year's figure is somewhat lower than last year's, but it is still above the average for the last eight years, namely, 99 (44 males and 55 females).

Heart Disease.—The number of deaths from heart disease was 104, and of those more than half occurred in persons over 65 years of age. The corresponding death-rate is 1.26 compared with 1.47 in 1929, and 1.41 the last five yearly average.

These deaths may be sub-divided as follows:—Valvular disease of the heart 34, angina pectoris 5, acute myocarditis 3, pericarditis

and fatty degeneration 2 each, acute endocarditis 1, and other diseases unspecified 57.

Apoplexy.—Apoplexy accounted for 92 deaths, of which the large majority occurred in persons over 55. These are classified by the Registrar General as—Cerebral hæmorrhage 72; hemiplegia 12; apoplexy, 6; cerebral embolism and thrombosis, 2. The death-rate is 1.12 as against 1.20 in 1929, and the mean of the last quinquennium 1.20.

Maternal Deaths.—All maternal deaths during pregnancy or within four weeks after the termination of pregnancy or later if the illness originated during pregnancy, childbirth or puerperium, were investigated and reported upon to the Department of Health for Scotland during the year. These deaths numbered 14 against 11 last year, and the maternal death-rate is, therefore, 7.41 per 1000 births as against 6.02 in 1929.

The causes of death may be classified as follows:—

(I.) Conditions connected with pregnancy and parturition.

Toxaemia of pregnancy, - - - - -	4
Haemorrhage, - - - - -	3
Sepsis (including one case of scarlet fever), -	3
Other conditions, - - - - -	1

(II.) Conditions associated with, but not directly connected with pregnancy or parturition.

Heart disease, - - - - -	3
--------------------------	---

Of these fourteen deaths, only six would appear to have been in any sense preventable. In only one case could there be said to have been satisfactory ante-natal supervision—a case of eclampsia which gave no warning of its approach until serious symptoms occurred.

Ante-natal examination of the pregnant woman is becoming more and more recognised as a necessary measure in preventing fatalities at, and illness following, confinement. The local authority has provided full facilities for this supervision being carried out, but the mental attitude of the expectant mother in many cases deprives her of the benefits of them. Many who have had children do not think supervision necessary because they have not had any trouble before, while others who have had no children are often deterred by false modesty or indifference. It is, however, a duty of every expectant mother to take advantage of all the means available to her for the preservation of her own life and health, and for ensuring as far as possible the birth of a fit and well developed child.

Diseases of Early Infancy and Malformations.—These accounted for 87 deaths, which may be sub-divided as follows:—Congenital debility and marasmus, 45; premature birth, 30; hydrocephalus, 2; other malformations, 6; other diseases peculiar to early infancy, 4. Last year the number was 87, and the average for the last five years is also 87. Further information regarding the diseases of children under one year of age will be found in the maternity and child welfare section of the report.

STATISTICAL COMPARISON.—The following Table gives a comparison of the various rates in the different public health districts and the average age at death in each as estimated in this department:—

District.	A.	B.	C.	D.
	East.	East Central.	West Central.	West.
Population,	25,653	17,106	25,939	13,433
Density per acre,	22.90	125.77	41.90	10.37
Birth-rate,	31.10	21.27	24.13	10.19
Infantile mortality-rate, ...	90.22	85.16	107.02	80.29
General death-rate,	14.18	11.98	13.99	14.21
Tuberculosis death rate, ...	1.40	1.05	1.34	0.64
Average age at death. ...	46.10	46.79	47.28	63.71

INFECTIOUS DISEASE.

The total number of cases of infectious disease ascertained during 1930 was 3,716, which is considerably above last year's figure of 1,894 and the mean of the previous quinquennium, 2,692. The incidence rate of infectious disease on the community during the year was 45.24 per 1,000, of the population.

Further information with regard to infectious disease will be found in Tables V. to X.

MEASLES.—Two thousand and sixty-one cases of the disease were notified during the year as against only 43 cases last year, and the previous five yearly average of 1,019. There were 28 deaths. Fourteen cases also had whooping cough, 14 had diphtheria, and one had chickenpox. Thirty-four cases in all were removed to hospital.

One thousand two hundred and seven cases and twenty-six deaths occurred in children under five years of age, and the incidence and death rates during the age period 0-5 years of age are, therefore, 126.83 and 2.73 respectively, while the case mortality is 2.15 per cent. These figures again demonstrate the deadly nature of the disease when it occurs in young children.

The condition was prevalent during the spring, with the epidemic peak in the month of April.

WHOOPIING COUGH.—Five hundred and thirteen cases were notified, with the highest incidence in May. Last year's figure was 512, and the last quinquennial mean 445. Fourteen cases also had measles and one scarlet fever.

The disease was responsible for 15 deaths, all of which occurred in children under five years of age. The incidence rate over the age period 0-5 years is, therefore, 30.68, the death-rate 1.57, and the case mortality rate 5.13 per cent.

SCARLET FEVER.—Two hundred and Ninety-seven cases were notified with the highest figure in October. Last year's number was 166, and the average for the previous five years 185. There were seven deaths. One case had also whooping cough, and one chickenpox. The incidence rate over the whole population is 3.61, and the case mortality rate 2.35 per cent.

DIPHTHERIA.—There were 129 cases of diphtheria discovered during the year, but the disease could at no time be said to be epidemic. The number last year was 198, and the last five yearly average 226. The incidence rate over the whole population is 1.57, and as the deaths numbered 5 the case mortality rate is 3.87 per cent. Ten cases also had measles.

Contacts.—Swabbing of the throats of contacts was carried out in 103 instances where there appeared to be any suspicious circumstances, and 3 persons who gave a positive result were removed to hospital, but none of them developed symptoms of illness.

Immunization.—A special session at the maternity and child welfare clinic was held every Wednesday during the year from 9th April to carry out immunization of children under the age of five years who were brought by their parents for this purpose, and in all during the period 349 injections were done, 111 children completing the course. The immunization was carried out without preliminary testing for susceptibility, and it is pleasing to record that no reaction of any degree of severity occurred in any of the children. These figures would indicate quite a promising beginning for a procedure of this kind, but unfortunately towards the end of the year the numbers were decreasing, although a large amount of propaganda work in connection with it was carried out. It would indeed be a great pity if this measure of well established value had to be discontinued through lack of foresight on the part of the parents of young children.

In addition to the above, 6 of the staff of the Children's Hospital, and 6 of the nursing staff of Smithston Hospital were

Schick tested. Four of those gave a positive reaction, three of whom were immunised.

PNEUMONIA.—One hundred and sixty-one cases were discovered, 59 being of the acute primary type, 30 influenzal and 72 presumably secondary to some other condition. The highest incidence occurred in the months of February, March and December. Last year's number was 192, and the average for the last five years 149. Twelve cases were removed to hospital for treatment. The number of deaths from this cause was 104, but notification was obviously far from complete, as 76 of the total were discovered in the death returns.

No further facilities for the hospital treatment of cases of pneumonia have yet been provided, although these are urgently required. The matter appears to have been left over until the effect of the Local Government (Scotland) Act on hospital policy becomes clear.

ENTERIC FEVER.—Twenty-seven cases of this group were notified during the year, as against one last year, and the previous quinquennial average of seven. They were all of the paratyphoid B. type.

The first case sickened on 16th June, and the others occurred at intervals up to the end of the year. Extensive investigations were carried out, but no common factor was discovered between them. The milk supply could not be incriminated, and the water supply did not seem to be a possible cause. The cases were all sporadic in type, and enquiry from other local authorities elicited the information that a similar thing was happening all over the west of Scotland, so that the cause was probably one of more than local operation.

Twenty-three of the cases were admitted to hospital, and there were four deaths.

CHICKENPOX.—Four hundred and forty-one cases were notified during the year, mostly in January, March and December. There were no deaths. The number last year was 678, and the last five yearly average 370. Seven of the cases occurred in adults, and some of them were of considerable severity, but the diagnosis was not greatly in doubt in any of them.

The practice of visitation and verification of the diagnosis in all unvaccinated cases was continued during the year.

CEREBRO-SPINAL MENINGITIS.—Five cases of this disease were notified, all from Greenock Royal Infirmary, whence two were

removed to Gateside Hospital. Three patients died, one recovered, and in one the diagnosis was later altered to influenza.

One contact, who was found to be harbouring the meningococcus in the throat, was removed to hospital, but discharged clear after a short period.

SMALLPOX.—There were no cases of this disease during the year. It was necessary, however, to keep under observation quite a number of persons who had been in contact with cases of smallpox from ships returning from abroad.

Vaccination.—The number of births registered in the east and west registration districts of the burgh during 1929 was 1,803. By the end of the year under review 510 of these children had been successfully vaccinated, 23 were found to be constitutionally insusceptible, 120 had died before vaccination could be carried out, in 7 a medical certificate of postponement had been issued, and 24 had left the district or were otherwise unaccounted for, while declarations of conscientious objection had been made in respect of 1,119. Sixty-two per cent., therefore, of the children available for vaccination were not vaccinated. This high figure of unvaccinated children in the community has already been commented upon on several occasions, and it is only to be hoped that parents who have followed the path of least resistance may not have occasion to regret their lack of foresight in the near future. If the type of disease which occurred in the cases from the S.S. "Tuscania," were to gain a hold in the burgh, many parents would doubtless be very glad to change their views on the vexed question of vaccination.

Two hundred and ninety-eight vaccinations were carried out on 217 children under the maternity and child welfare scheme at the Corporation clinics, in 153 cases vaccination was successful on the first occasion, in 43 cases on the second occasion, in 11 cases on the third occasion, while 7 were considered insusceptible after three unsuccessful attempts. In three cases the procedure was not completed, as the child was not brought back after unsuccessful attempts.

PUERPERAL FEVER AND PUERPERAL PYREXIA.—

- (I) Total number of cases occurring in the area of the Local Authority (corrected figures as finally diagnosed).

(a)	Puerperal Fever (Maternity Hospital 1),	3
(b)	„ Pyrexia (Maternity Hospital 7),	30

- (II) Total number of cases removed to infectious diseases hospital.
- | | | |
|-----|---|----|
| (a) | Puerperal Fever (Maternity Hospital 0), | 2 |
| (b) | „ Pyrexia (Maternity Hospital 5), | 18 |
- (III) Total number of deaths.
- | | | |
|-----|---|---|
| (a) | Puerperal Fever (Maternity Hospital 0), | 1 |
| (b) | „ Pyrexia (Maternity Hospital 0), | 1 |
- (IV) Number of cases following instrumental delivery.
- | | | |
|-----|-----------------------------------|---|
| (a) | Puerperal Fever, - - - - | 0 |
| (b) | „ Pyrexia (Maternity Hospital 3), | 6 |
- (V) Number of deaths occurring in cases included under (IV).
- | | | |
|-----|---|---|
| (a) | Puerperal Fever (Maternity Hospital 0), | 0 |
| (b) | „ Pyrexia (Maternity Hospital 0), | 1 |
- (VI) Number of cases where the Local Authority provided assistance on the request of medical practitioners.
- | | | |
|-------|-----------------------------------|----|
| (i) | Consultant Service, - - - - | 4 |
| | Puerperal Fever, - - - | 1 |
| | „ Pyrexia, - - - | 3 |
| (ii) | Bacteriological Examinations, - - | 1 |
| (iii) | Skilled nursing at home, - - - | 0 |
| (iv) | Hospital Treatment, - - - - | 15 |
| | Puerperal Fever, - - - - | 2 |
| | „ Pyrexia, - - - - | 13 |
- (vii) Observations on the working of the Regulations.

These regulations have probably been helpful in achieving earlier hospital treatment of puerperal conditions, but the facilities provided have not been taken advantage of to the extent that might have been expected.

Investigation.—All cases of puerperal fever and puerperal pyrexia were investigated as they occurred.

Puerperal Fever.—Of the four cases notified, one was later diagnosed as pneumonia, but it must be considered of septic type. Two of the patients were attended by midwives, one by a doctor, and one was delivered in an institution: the pregnancies were second, third, fifth and seventh respectively: in one Caesarean

section had been performed, in one there was a suspicion of a pre-existing septic focus, and in the other two no obvious exciting cause was discovered.

PUERPERAL PYREXIA.

(I) Age of patient.

15-20 years,	-	-	-	-	-	-	5
21-25 years,	-	-	-	-	-	-	11
26-30 years,	-	-	-	-	-	-	4
31 and over,	-	-	-	-	-	-	10

(II) Number of confinement.—

First, -	-	-	-	-	-	-	13
Second, -	-	-	-	-	-	-	3
Third, -	-	-	-	-	-	-	3
Fourth, -	-	-	-	-	-	-	3
Fifth to Eleventh,	-	-	-	-	-	-	8

(III) Nature of attendance.—

Doctor, -	-	-	-	-	-	-	1
Midwife, -	-	-	-	-	-	-	16
Midwife and Doctor, -	-	-	-	-	-	-	5
Institution, -	-	-	-	-	-	-	5
Doctor and Institution, -	-	-	-	-	-	-	1
Midwife, Doctor and Institution, -	-	-	-	-	-	-	2

(IV) Nature of confinement.—

Forceps delivery, -	-	-	-	-	-	-	5
Forceps and craniotomy, -	-	-	-	-	-	-	1
Craniotomy, -	-	-	-	-	-	-	1
Version, -	-	-	-	-	-	-	1
Caesarean section, -	-	-	-	-	-	-	1
Normal delivery, -	-	-	-	-	-	-	21

(V) Possible exciting causes.—

Conditions not attributable to parturition, -	-	-	-	-	-	-	11
Lacerations, -	-	-	-	-	-	-	6
Unhealthy placenta, -	-	-	-	-	-	-	2
Adherent placenta, -	-	-	-	-	-	-	1
Retained membranes, -	-	-	-	-	-	-	1
Caesarean section, -	-	-	-	-	-	-	1
Difficult labour, -	-	-	-	-	-	-	1
Nothing found on investigation, -	-	-	-	-	-	-	7

PULMONARY TUBERCULOSIS.

The number of cases on the register at the end of 1929 was 479. During the year 117 new cases were notified, 21 left the district, 73 died, 20 were struck off as non-tuberculous, and 10 as not requiring further supervision. Three cases were re-admitted to the register, but in none of these had the diagnosis been verified by the end of the year. There remained, therefore, on the roll at 31st December, 475 patients (279 males and 196 females).

Particulars of age periods, etc., are as follows:—

		Under 5 years	5-10	10-15	15-25	25-35	35-45	45-65	65 up.	Total.
Sputum not examined.	Males, -	—	5	29	54	16	18	23	—	145
	Females.	—	10	23	34	19	15	11	—	112
Tubercle Bacilli found,	Males, -	—	—	—	11	19	20	15	—	65
	Females,	—	—	1	14	14	11	7	—	47
Tubercle Bacilli not found,	Males, -	—	—	1	10	15	18	25	—	69
	Females,	—	—	1	11	11	6	7	1	37
Total,		—	15	55	134	94	88	88	1	475

In addition 51 patients were under observation as suspects, and 16 as contacts of known cases.

NOTIFICATION.—One hundred and seventeen cases (64 males and 53 females) were notified as suffering from pulmonary tuberculosis as against 134 last year, and 138 the last five yearly average. The sputum was examined in 69 cases, and in 44 tubercle bacilli were found to be present.

The age periods are as follows:—

		Under 5 years	5-10	10-15	15-25	25-35	35-45	45-65	65 up.	Total.
Males, -	2	1	3	21	16	10	11	—	—	64
Females, -	1	3	3	19	10	9	7	1	—	53

Forty-four of these patients died before the end of the year, and the average period of survival after notification was 72 days:

in addition three left the district, in seven the diagnosis was not verified, and three were still under observation as doubtful at the end of the year.

The following Table shows the home conditions of the cases, and the percentage of the total cases in houses of different sizes compared with the estimated percentage of such houses in the whole burgh:—

	Number of Cases.	Percentage of Total.	Percentage of Total Houses in the Burgh.
1 Apartment, - - - -	14	12	10
2 Apartments, - - - -	49	42	45
3 Apartments, - - - -	34	29	27
4 Apartments, - - - -	6	5	8
5 Apartments and over, - -	6	5	10
Institutions, Lodginghouses, etc.	8	7	—

DISPENSARY.—The dispensary was run on similar lines to last year.

The number of persons who attended was 252, the total number of primary visits was 59, and the number of re-visits 988.

One hundred and forty-four X-ray examinations of the chest were carried out as formerly at Greenock Royal Infirmary,

DOMICILIARY TREATMENT.—The arrangements for this service remained unchanged during the year. Sixty-two persons received extra nourishment, the details of which are given later.

INSTITUTIONAL TREATMENT.—No further material progress was made during 1930 by the Renfrewshire Joint Sanatorium Board with regard to the proposed sanatorium at Lochwinnoch, but the matter is still under consideration.

The following Table gives the number of patients treated in the various institutions available to the burgh, and their condition on discharge:—

	Noranside Sanatorium.	Bridge-of-Weir Sanatorium.	Hairmyres Colony.	Gateside Hospital.	Smithston Pavilion.	Brompton Sanatorium.
Number at 1st January, 1930, ..	8	17	3	20	7	1
Admitted during the year, ...	18	15	...	60	23	...
Treated during the year, ...	26	32	3	80	30	1
Total number discharged, ...	18	13	3	49	16	1
" " much improved, ..	...	2	...	1	2	...
" " improved, ...	14	9	3	12	8	...
" " stationary, ...	3	1	...	23	4	...
" " worse, ...	1	1	...	13	2	...
Left against advice, ...	3	...	1	36	10	...
Died, ...	...	1	...	22	1	...
Transferred to hospital, ...	1	...	...	...	...	...
" " sanatorium, ...	...	...	...	...	...	...
Remaining at 31st Dec., 1930, ...	7	18	...	9	13	...

HOME SUPERVISION.—The nurses of the Greenock and District Nursing Association continue to pay supervisory visits to patients on the tuberculosis roll. The number not attending the dispensary who were under supervision at the beginning of the year was 39, and the average number during the period was 40.

NON-PULMONARY TUBERCULOSIS.

The number on the register at the end of 1929 was 318. During the year 53 new cases were notified, 11 left the district, 33 died, 6 were struck off as non-tuberculous, and 18 as not requiring further supervision, leaving 303 (156 males and 147 females) on roll at 31st December, 1930.

The age periods and situation of lesions are shown in the following Table:—

LESION.				Under 5 years	5—10 years	10—15 years	15—25 years	25—35 years	35—45 years	45—65 years	65 upwards	Total
Abdomen,	...	...	Males	2	7	12	14	...	2	...	...	37
			Females	...	2	7	9	3	1	...	...	22
Spine,	...	...	Males	1	4	2	3	2	2	...	...	14
			Females	1	...	1	4	1	...	1	...	8
Bones and Joints,	...	...	Males	4	14	11	21	3	...	3	...	56
			Females	3	8	11	13	2	4	2	1	44
Superficial Glands,	...	...	Males	1	7	11	8	4	2	...	...	33
			Females	...	7	9	19	1	6	3	...	45
Lupus,	...	...	Males	...	...	2	2	...	...	1	...	5
			Females	...	4	1	3	2	2	1	1	14
Other Parts or Organs,	...	...	Males	...	1	3	5	1	...	1	...	11
			Females	2	1	1	4	1	2	3	...	14
Total	...	...		14	55	71	105	20	21	15	2	303

NOTIFICATION.—The number of new cases notified was 53, as against 52 last year and 56 the average for the last five years. Nineteen of these died before the end of the year, the average period of survival being 29 days, 2 left the district, in 2 the diagnosis was not verified, and 3 were still under observation as doubtful at 31st December.

The following Table shows those cases classified according to age groups and situation of lesion :—

LESION.			Under 5 years	5—10 years	10—15 years	15—25 years	25—35 years	35—45 years	45—65 years	65 upwards	Total
Abdomen ...	...	{ Males	2	1	...	2	...	...	...	...	5
		{ Females	1	1	...	3	...	...	...	...	5
Spine, ...	...	{ Males	...	...	...	1	...	1	...	...	2
		{ Females	1	...	...	...	...	...	...	...	1
Bones and Joints	...	{ Males	2	3	...	2	...	...	2	...	9
		{ Females	1	1	2	2	...	...	...	...	6
Glands ...	...	{ Males	1	...	2	...	...	...	...	...	3
		{ Females	...	2	...	3	...	...	...	...	5
Lupus ...	...	{ Males	...	...	1	...	...	...	...	...	1
		{ Females	...	...	...	1	...	...	...	...	1
Other Parts or Organs, ...	...	{ Males	6	2	...	1	...	...	...	...	9
		{ Females	2	...	...	1	...	2	1	...	6
Total, ...	...		16	10	5	14	2	3	3	...	53

The home conditions of the various notified cases were found to be as follows:—

	Number of Cases.	Percentage of Total.	Percentage of Total Houses in the Burgh.
1 Apartment, - - - -	9	17	10
2 Apartments, - - - -	30	56	45
3 Apartments, - - - -	8	15	27
4 Apartments, - - - -	1	2	8
5 Apartments and over, - -	3	6	10
Institutions, Lodginghouses, etc.	2	4	—

Tuberculous Meningitis.—

Number of cases discovered,	-	-	-	15
Number notified,	-	-	-	13
Number of deaths,	-	-	-	15
Treated in Greenock Royal Infirmary,	-	-	-	10

Ten of these cases were under five years, the mean age being 1 year 9 months, and the average duration of illness was 13 days: in only two cases was there any history or suspicion of tuberculosis in the family, and in neither case did it affect a near relative of the child. Three of the cases came within the age group 5-10, with a mean of six years, and the average duration of illness was 13 days: in no case was there any history of tuberculosis in the family. The two remaining cases were aged 33 and 21 years respectively, the average duration of illness was 11 weeks, and there was no previous history of tuberculosis, and no source of infection was discovered.

DISPENSARY.—The number of patients who attended the dispensary during the year was 209. The primary visits totalled 36, and the number of re-visits 1,497.

Ultra-violet light therapy.—The mercury vapour lamp was in use throughout the whole of the year for the treatment of tuberculous conditions, and actually burned for 291 hours. The results in general were similar to those of the previous year, and considerable success was obtained in superficially placed lesions, particularly where a discharging sinus or ulceration was present. The Quartz compressor was given a thorough trial, and was found to be fairly effective in lesions of comparatively slight extent, but in extensive lesions its effect was limited, although it certainly appeared to prevent further spread of the condition.

The following conditions were treated:—

General Debility,	-	-	-	-	8
Tuberculosis of Superficial Glands,	-	-	-	-	13
„ Bones and Joints,	-	-	-	-	8
„ Skin,	-	-	-	-	14
„ Ribs,	-	-	-	-	2
„ Spine,	-	-	-	-	1

Eighteen X-ray examinations were carried out.

DOMICILIARY TREATMENT.—Fifteen cases received extra nourishment, the details of which are given later.

HOME SUPERVISION.—The number of patients not attending the dispensary, who were under home supervision by the visiting nurses at the beginning of the year, was 53, and at 31st December 51, the average number during the year being 50.

INSTITUTIONAL TREATMENT.—The following Table gives the numbers treated in the various institutions used, and their condition on discharge:—

	Bridge-of-Weir Sanatorium.	St. Andrew's Home, Millport.	Gateside Hospital.	Smithston Pavilion.	Biggart Home, Prestwick.	Noranside Sanatorium.	Hairmyres Colony.
Number at 1st January, 1930, ...	...	7	7	4	...	...	...
Admitted during the year, ...	2	10	15	1	1	2	1
Treated during the year	2	17	22	5	1	2	1
Total number discharged, ...	...	2	17	...	...	...	...
„ „ much improved, ...	...	1	1	...	...	...	...
„ „ improved, ...	...	2	7	...	...	...	...
„ „ stationary, ...	...	...	3	...	...	...	...
„ „ worse, ...	...	...	4	...	...	...	...
Left against advice, ...	...	...	5	...	...	...	...
Died, ...	...	...	4	2	...	...	...
Transferred to hospital, ..	1	...	...	...	...	...	...
Remaining at 31st Dec., 1929, ...	1	15	1	3	1	2	1

ALL TUBERCULOSIS.

The number on the tuberculosis roll at the end of the year therefore, was, 778.

The number of persons who attended the dispensary was 461 and the total attendances amounted to 2,768, as against 2,547 last year, and 4,122, the average for the last five years.

The number of patients visited in their homes by the nurses was 977, and the total supervisory visits paid amounted to 5,067.

The number of persons who received extra nourishment was 77, as against 75, last year, and 194 the last five yearly average. The total cost of this service was approximately £273.

The number of prescriptions paid for by the Local Authority under the tuberculosis scheme was 354, and the total cost £38 0s 6d. The number of persons who received these prescriptions was 99, and the average cost per person was 7/8.

In addition to the above, the following assistance was provided by the Renfrewshire Memorial to the late King Edward Memorial Fund:—

Rent fully paid for a period, - -	7
Rent part paid for a period, - -	1
Rent fully paid for a period and clothing, - - - - -	2
Clothing, - - - - -	24
Dentures, - - - - -	4
Water Cushion, - - - - -	2
Spectacles, - - - - -	1
Special Boots, - - - - -	3
Cot Bed, - - - - -	1

MATERNITY SERVICE AND CHILD WELFARE SCHEME.

During the year a change was made in infant visitation, and each baby was visited weekly for the first month after birth, fortnightly for the next two months, and thereafter monthly until the end of one year. This change is reflected in the figures given.

A special weekly clinic was instituted for the purpose of immunising children under five years of age against diphtheria, the details of which are given elsewhere, and towards the end of the year tentative arrangements were made for the vaccine treatment of cases of whooping cough on a small scale. In this community, however, such measures as these are very difficult to start, and equally difficult to keep going.

The department has again to thank Mr Riddell and Mr Gray of the R.S.S.P.C.C. for their ever ready help in many matters.

BIRTHS.

Number Registered (corrected),	{ Legitimate, 1,787 Illegitimate, 101 }	1,888
Number Notified, ... ..	..	1,925

Number of births classified according to nature of attendance:—

Medical Practitioner,	331
Midwife,	1,468
Institutions,	126

Number of stillbirths (births of dead children), 85

Of these 20 occurred in the Maternity Hospital where abnormal cases are treated.

STILLBIRTHS.

Under this heading are included all the births of dead children after the expiry of the seventh month of pregnancy. Eighty-five cases were notified, of which 20 occurred in the maternity hospital where abnormal cases are treated.

Each of these stillbirths was investigated, and as a result two were excluded as having occurred before the end of the seventh month of pregnancy. From the investigation of the remaining 83 the following facts were elicited:—

(1) Age of mother.—

Under 20—2.	25-29—18.	35-39—16
20-24—15.	30-34—18.	40-over—11.

In three cases the age of the mother was not elicited.

(2) Number of pregnancy.—

First, 22.	Fifth, 6.	Ninth, 4.
Second, 10.	Sixth, 10.	Tenth, 2.
Third, 6.	Seventh, 7.	Eleventh, 4.
Fourth, 7.	Eighth, 3.	Fourteenth 1.
	Sixteenth, -	- 1.

(3) Duration of pregnancy.--

In eleven cases pregnancy had lasted for seven months, in fifteen eight months, and in fifty-seven stillbirth occurred at term.

(4) Nature of attendance.—

Midwife,	28.
Midwife and Doctor,	24.
Midwife, Doctor and Institution,	14.

Doctor, ...	...	...	...	11.
Institution, ...	...	...	...	3.
Doctor and Institution, ...	...	...	...	3.

(5) Presentation.—

Vertex, -	-	56.	Foot, -	-	2.
Breech, -	-	18.	Face, -	-	2.
Transverse, -	-	3.	Shoulder, -	-	1.
Hand, -	-	-	-	-	1.

(6) Nature of Interference.—

No Interference, -	52.	Forceps and Craniotomy, 4.
Forceps, -	13.	Version and Forceps, - 2.
Version, -	5.	Craniotomy, - 1.
Forceps and Version, 4.		Caesarean Section, - 1.
Induction of Labour, -	1.	

(7) Condition of Child.—

Normal, -	-	42.	Congenital abnormality 12.
Macerated, -	-	25.	Flabby, - - 3.
Blanched, -	-	-	1.

(8) Condition of Placenta.—

In sixty-six cases the placenta was healthy, in fourteen unhealthy, and in three definitely abnormal.

(9) Ante-natal health of mother.—

In forty-eight cases the ante-natal health of the mother was reported to be good, in twenty-one poor, and in fourteen fair.

(10) Ante-natal supervision.—

In thirty-six cases there was no ante-natal supervision, in twenty ante-natal examination was carried out by a midwife, and in nine cases by a doctor, and in eighteen the mother had attended the ante-natal clinic.

(11) Causal Factors.—

(1) Ante-natal deaths, ...	...	...	37
Illness of or injury to mother,			11
Ante-partum hæmorrhage, ...			10
Placenta Prævia, ...	...	...	3
Illness of or injury to mother,			6
No obvious cause, ...	...	...	1
Abnormality of fœtus, ...			4

	Suspected Syphilis, ...	...	3
	Abnormal Placenta, ...	...	1
	No obvious cause, ...	...	8
(2)	Intra-natal deaths—obstetrical difficulty, ...		36
	Contracted Pelvis, ...	...	12
	Breech Presentation, ...	...	6
	Compression of Cord, ...	...	5
	Hydrocephalus, ...	...	4
	Twin Birth, ...	...	3
	Occipito-Posterior Presentation, ...	...	3
	Transverse Presentation, ...	...	1
	Foot Presentation, ...	...	1
	Rigidity of Os, ...	...	1
(3)	Abnormality of Child—not viable, ...	...	3
(4)	Eclampsia, ...	...	1
(5)	No obvious cause, ...	...	6

ABORTIONS.—

Seventeen abortions were also investigated but the information elicited was not sufficient to warrant any definite statement being made regarding them.

INFANTILE MORTALITY.

Number of deaths of children under 1 year, ...	181
Rate per 1000 Births, ...	95.86

Number of Deaths and Rates per 1000 Births classified according to age groups and causes of death :—

CAUSES OF DEATH.	AGE GROUPS.					Total Deaths.	Rate per 1,000 Births.
	Under 1 week	1—4 weeks	4 weeks—3 months.	3 months—6 months.	6 months—12 months.		
Chickenpox, ... ..	...	...	...	...	...	...	...
Measles, ... ..	...	...	...	1	9	10	5.30
Scarlet Fever, ... ..	...	...	...	...	...	...	...
Whooping Cough, ... ..	...	1	2	1	3	7	3.71
Diphtheria and Croup, ... ..	...	...	...	...	...	...	...
Erysipelas, ... ..	...	...	1	...	...	1	0.53
Tuberculous Diseases, ... ..	...	...	...	1	1	2	1.06
Meningitis (non-tuberculous), ... ..	...	...	...	2	1	3	1.59
Hydrocephalus, ... ..	...	...	1	...	1	2	1.06
Convulsions,	2	3	...	1	3	9	4.77
Pneumonia (all forms), ... ..	...	...	5	6	18	29	15.36
Bronchitis, ... ..	...	1	3	3	4	11	5.82
Diarrhoea and Enteritis, ... ..	...	2	2	6	5	15	7.94
Other Digestive Diseases,	1	...	...	...	...	1	0.53
Congenital Malformations,	1	1	2	1	...	5	2.65
Congenital Heart Disease, ... ..	...	...	...	...	...	...	...
Premature Birth,	23	2	4	1	...	30	15.89
Atrophy, Debility, & Marasmus,	19	9	8	7	2	45	23.83
Atelectasis, ... ..	...	...	...	...	...	...	...
Injury at Birth, ... ..	...	...	...	...	...	...	...
Suffocation, Overlying, ... ..	...	...	...	...	...	...	...
Syphilis, ... ..	...	...	...	...	...	...	...
All other Causes,	4	1	4	2	...	11	5.82
Total Deaths,	50	20	32	32	47	181	...
Rate per 1000 Births,	26.48	10.59	16.95	16.95	24.89	...	95.86

This table is compiled from the corrected number of deaths (Registrar General).

MATERNAL MORTALITY.

Number of deaths resulting from pregnancy or confinement, 14

Number of deaths resulting from puerperal sepsis, 3

Details will be found under deaths and death-rate.

HOME VISITATION.

(1) Infants—

Number of children visited, 2,652

Number of first visits, 1,781, } 21,937

Number of re-visits, 20,156, }

Number of infants at age of 6 months—

(i) Breast fed, 695

(ii) Partially breast fed, 121

(iii) Artificially fed, 396

Number of Infants born—

(i) Prematurely,	34
(ii) At full time,	1,891

(2) Children (1-5 years)—

Number of children visited, ...	...	...	6,801
Number of first visits, 42	{	...	..
Number of re-visits, 14,076			
			14,118

(3) Expectant Mothers—

Number visited,	..	...	..	...	114
Number of first visits,	109	}	...	...	130
Number of re-visits,	21				

(4) Nursing Mothers—

Number of first visits, 61	}	180
Number of re-visits, 119				

(5) Visits of special enquiry, 79

ANTE-NATAL CONSULTATIONS—

Two sessions weekly of two hours duration are held in Shaw Place Clinic, and one session weekly is held in Craigieknowes Clinic:—

Total number of expectant mothers attending,		448	
Total number of attendances, {	First,	407	1,399
	Subsequent,	992	

Classified summary of conditions found :—

Digestive conditions,	205
Genito-urinary conditions,	34
Respiratory conditions,	68
Cardio-vascular conditions,	6
Nervous conditions,	11
Skin conditions,	23
Dental conditions,	77
Nose and throat conditions,	24
Eye conditions,	8
Ear conditions,	7
Venereal conditions,	9
Gynaecological conditions,	73
Anaemia and debility,	95
Other conditions,	17

Conditions directly connected with pregnancy:—

Toxaemia,	162
Varicose veins,	38
Haemorrhage,	12
Pruritis,	12
Abortion, threatened and complete, ...	7
Pregnancy doubtful,	31
Oedema of feet,	46
Other conditions,	10
No abnormality—advice given,	37
Number of cases referred to ante-natal ward,	8
„ „ treated at clinic,	314

POST-NATAL AND OTHER CONSULTATIONS—

Two sessions weekly of two hours duration are held in Shaw Place Clinic, and two also in Craigieknowes Clinic.

Number of attendances, {	First, 366	1,114
	Subsequent, 748	

Classified summary of conditions found:—

Digestive conditions,	156
Genito-urinary conditions,	17
Respiratory conditions,	51
Cardio-vascular conditions,	4
Nervous conditions,	4
Skin conditions,	22
Dental conditions,	118
Ear nose and throat conditions, ..	16
Eye conditions,	12
Anaemia and debility,	239
Other conditions,	30
Conditions directly connected with puer- perium,	14
Gynæcological conditions,	17
No abnormality—advice given,	16

CHILD WELFARE CONSULTATIONS.

Two sessions weekly of 2 hours duration are held in Shaw Place Clinic, and two also in Craigieknowes Clinic.

Total number of children attending—

Under one year of age, {	at 30th June, 1930,	543
Over one year of age, }		460

Number of first attendances,

Under one year of age, ..	...	..	498
Over one year of age, ...	...	...	95

Total number of attendances,

Under one year of age, ..	...	...	1,841
Over one year of age, ...	...	...	1,821

Illnesses Recorded—

Digestive conditions, ...	...	...	630
Respiratory conditions,...	...	...	332
Genito-urinary conditions,	...	...	106
Nervous conditions, ...	...	...	35
Skin conditions, ...	...	...	272
Glandular Conditions, ..	...	...	43
Dental conditions, ...	...	...	462
Ear, nose and throat conditions, ...	...	...	98
Eye conditions, ...	...	...	110
Septic conditions, ...	...	...	107
Infectious conditions, ...	...	...	129
Anæmia, debility and marasmus,	...	...	655
Rickets, ...	...	...	72
Accidents, ...	...	...	19
Congenital abnormalities,	...	...	93
Other conditions, ...	...	...	74
No abnormality—vaccination performed, ...	...	...	217
„ „ —advice given, ...	...	...	300

SPECIAL TREATMENT CENTRES—

Teeth—Corporation Dental Clinic.

Number of attendances—

Mothers, expectant, 31 }	...	...	187
Mothers, nursing, 156 }	...	...
Children, ...	...	..	64

Work carried out—

Mothers—

Carious teeth extracted (local anæsthetic),	132
Carious teeth extracted (no anaesthetic),	5
Gums treated, ...	6
Advice given, ...	7

Children—

Carious teeth extracted (local anæsthetic), ...	8
Carious teeth extracted (general anæsthetic),	1
Carious teeth extracted (no anæsthetic), ...	47
Gums treated,	4
Advice given,	4

Number of dentures supplied—

Upper and lower dentures,	2
Upper dentures,	8
Repairs to dentures,	4

Eyes—Greenock Eye Infirmary.

Number of attendances (children),	1,507
Number of attendances (nursing and expectant mothers),	5

Summary of conditions present—

Children—

Conjunctival conditions,	97
Corneal conditions,	23
Eyelid conditions,	23
Lachrymal conditions,	2
Ophthalmia neonatorum,	29
Ophthalmia, other,	16
Congenital abnormality,	1
Strabismus, convergent,	20
Strabismus, divergent,	2
Refraction errors,	2

Mothers—

Conjunctivitis, angular,	1
Refraction errors,	1

Ear, Nose and Throat—Greenock Dispensary.

Number of attendances (children),	447
--	-----

Summary of conditions found—

Diseases of ear,	61
„ nose,	17
„ mouth,	2
„ throat,	1
„ lymph glands,	2
„ parotid gland,	2
Enlarged tonsils and adenoids,	44

Operations performed—

Mastoid complete,	1
„ partial,	2
Tonsillectomy and adenectomy,	41

Other Ailments—Greenock Royal Infirmary.

Number of attendances,	2,701
Number who received in-patient treatment, ...	126

Summary of conditions found :—

Digestive conditions,	203
Respiratory conditions,	118
Genito-urinary conditions,	108
Nervous conditions,	16
Cardio-vascular conditions,	1
Skin conditions,	60
Glandular conditions,	26
Bone and Joint conditions,	20
Dental conditions,	11
Eye conditions,	5
Blood conditions,	2
Septic conditions,	104
Infectious conditions,	31
Tuberculous conditions,	2
Anæmia, debility and marasmus,	26
Rickets,	5
Injuries and accidents,	232
Other conditions,	29

ULTRA-VIOLET LIGHT CLINIC.—

Number of cases under one year of age, ...	6	} 157
Number of cases over one year of age, ...	151	
Number of attendances, ... ..	...	1,676

Conditions treated :—

Malnutrition and underweight,	100
Rickets,	39
Marasmus,	3
Tuberculosis,	2
Other conditions.	13

Results obtained.—

The results on the whole have been fairly satisfactory, especially in cases of rickets and malnutrition.

The work of this clinic, however, is still hampered by the lack of reasonably suitable accommodation, which undoubtedly prevents the achievement of the full benefit which the treatment provided might afford.

FOOD AND MILK—

Number of applications received—

Food,	Nil.
-----------	-----	-----	-----	-----	------

(Twenty-four expectant mothers, however, were, by special arrangement, provided with free soup daily from the communal soup kitchen during the early part of the year).

Milk.—

Mothers, expectant.	65	}	...	...	84
Mothers, nursing,	19				
Children, ...	...	...	...	...	274

All of these cases were certified on medical grounds as requiring milk, and all were considered necessitous. Twenty-nine thousand seven hundred and sixty-seven pints of milk were supplied in this way during the year at an approximate cost of £343.

Dried milk substitutes—

Number of children on Glaxo, ...	...	22
Number of children on Cow and Gate, ...	...	68
Number of children on Ostermilk, ...	...	17
Number of mothers on Almata, ...	...	8

Six hundred and twenty pounds of these foods were provided at cost price, and 393 were given free in necessitous cases at a net cost of approximately £30.

MEASLES—

Number of cases notified (notification voluntary, by householder), ...	...	1,207
Number of deaths, { from measles, ...	...	26
{ from sequelæ (included above),	...	24
Number of cases removed to hospital, ..	...	22
Number of special domiciliary visits, ...	...	331
Number of special staff engaged, ...	...	Nil.

WHOOPIING COUGH—

Number of cases notified (notification voluntary, by householder),	292
--	-----	-----

Number of deaths, { from whooping cough, ...	15
{ from sequelæ (included above),	9
Number of cases removed to hospital, ..	10
Number of special domiciliary visits, ...	Nil.

OPHTHALMIA NEONATORUM—

Number of cases notified { by medical practitioner, 9 }	60
{ by midwives, ... 48 }	
{ by institutions, ... 3 }	
Number of cases proved to be gonococcal, ..	Nil.
Number treated in Eye Infirmary (out-patients),	22
Number of cases removed to hospital, ...	1
Number of cases in which there was appreciable loss of vision,	1

PROVISION OF MIDWIFERY SERVICES IN NECESSITOUS CASES—

Cases under investigation at 1st January, 1930, -	16
Number of applications received, - - -	150
Number of applications granted, - - -	27
Number of applications refused, - - -	106
Maternity benefit, - - -	84
Over scale, - - -	12
Late application, - - -	4
Other reasons, - - -	6

Number of applications under consideration at 31st December, 1930, - - - -	33
Total expenditure, - - - -	£41 5s

GREENOCK CORPORATION MATERNITY HOSPITAL—

	Mothers.	Children.
Number in Hospital at 1st January, 1930, - -	3	2
Number of admissions during 1930, 127		1
Number of live births, „ „ —		89
Number of stillbirths, „ „ —		20
Number of deaths, „ „ 2		5
Number of discharges „ „ 122		81
Number in Hospital at 31st December, 1930, - -	9	5

(1) Ante-natal cases— 36

Condition Found.	Result of Treatment.
6 Albuminuria, - -	{ 3 treated, delivered, recovered. 2 treated, discharged improved. 1 treated, discharged unimproved.

3 Eclampsia, - -	{ 2 treated, delivered, recovered. 1 treated, died undelivered.
12 Ante-partum Hæmorrhage, - - -	{ 7 treated, discharged recovered. 4 treated, discharged improved. 1 treated, discharged unimproved.
3 Cardiac disease, -	{ 2 treated, discharged improved. 1 treated, delivered, died.
3 False labour, - -	Treated discharged before delivery.
6 Excessive vomiting, -	{ 2 treated, recovered, discharged. 4 treated, delivered, recovered.
1 Cystitis, - - -	Treated, discharged improved.
1 Salpingitis, - - -	Treated, discharged improved.
1 Acute Encephalitis, -	Treated, transferred to Royal Infirmary.

(2) Abortions—

2

Condition Found.

Results of Treatment.

2 Six months' pregnancy. (Complete Abortion).	{ Treated, recovered, discharged.
--	-----------------------------------

(3) Abnormal and Complicated Confinements,

50

Condition Found.

Result of Treatment.

18 Contracted pelvis, -	{ 12 caesarean section, recovered. 3 craniotomy, recovered. 3 forceps delivery, recovered.
6 Delay in 2nd stage, -	Forceps delivery, recovered.
1 Eclampsia, - - -	Forceps delivery, recovered.
2 Hydrocephalus, -	Craniotomy, recovered.
3 Ante-partum hæmorrhage, - - -	{ 1 version delivery, recovered. 1 forceps delivery, recovered. 1 normal delivery, recovered.
2 Transverse presentation,	{ Internal version, delivered, recovered.
1 twin labour (breech), -	Delivered, recovered.
3 Placenta prævia, -	{ 2 internal version, delivered, recovered. 1 internal version, transferred to Gateside Hospital.
14 Breech presentation, -	Treated, delivered, recovered.

(4) Other cases of confinement—

(a) Number of normal deliveries, - - -	62
(b) Number of cases delivered without medical attendance at delivery, - - -	65
(c) Number of instrumental deliveries exclusive of those appearing under (3), - - -	4
(d) Number of cases of puerperal morbidity, -	5
(e) Number of cases under (d) in which delivery was instrumental, - - - -	3
(f) Number of deaths, - - - -	2
Eclampsia, - - -	1
Cardiac Disease, - - -	1
(5) Number of infants born { (1) alive, - - -	89
{ (2) stillborn, - - -	20
Number of sets of twins, { (1) alive, - - -	1
{ (2) stillborn, - - -	—
(6) Number of deaths of infants under 8 days old, -	5
(7) Number of cases of puerperal sepsis removed from institution, - - - -	5
(8) Post-natal cases, - - - -	4

Condition Found.

Result of Treatment.

3 Eclampsia, - - Treated, discharged, recovered.

1 Premature labour at home, Treated, discharged, recovered.

HOSPITALS FOR SICK CHILDREN—

Children's Hospital, Shaw Place.

Number in hospital at 1st January, 1930, -	22
Number admitted during 1930, - - -	158
Number discharged, - - - -	133
Number died, - - - -	28
Number remaining in hospital at 31st Dec., 1930,	19
Average period of residence, -	50.5 days.

The following were the conditions present and the results of treatment in children admitted during 1930:—

CONDITION.	Cases.	Improved.	Not Improved.	Died.	Transferred to Smithston Hospital.	Transferred to Gateside Hospital.	Transferred to Convales. Home	Transferred to Broadstone Hospital.	Sent home with Chickenpox.	Cases remaining at 31st December, 1930.
Abscess,	1	1	...	...	...	...	...	...	...	...
Bronchitis,	6	1	...	3	...	...	...	...	...	2
Bronchitis with Hernia	1	...	...	...	...	...	...	1	...	...
Convulsions,	1	...	...	1	...	...	...	...	...	...
Convulsions with pneu- monia,	1	...	...	1	...	...	...	...	...	...
Debility,	13	10	2	1	...	...	...	...	...	...
Debility with con- junctivitis,	1	...	...	...	...	...	...	...	...	...
Debility after measles,	1	...	1	...	...	...	...	...	...	...
Debility with rickets,	1	1	...	...	...	...	...	...	...	...
Debility with skin con- dition,	2	2	...	...	...	...	...	...	...	...
Debility with under- weight,	12	3	2	1	1	1	1	...	...	3
Debility after whoop- ing cough,	1	1	...	...	...	...	...	...	...	...
Gastro-enteritis,	17	12	2	3	...	...	...	...	...	...
Healthy child (mother in hospital),	3	3	...	...	...	...	...	...	...	...
Infantile Paralysis, ...	1	1	...	...	...	...	...	...	...	...
Jaundice,	1	...	...	1	...	...	...	...	...	...
Marasmus,	16	8	...	4	...	...	...	...	...	4
Marasmus with cleft palate,	1	...	...	1	...	...	...	...	...	...
Marasmus with gastro- enteritis,	3	1	...	2	...	...	...	...	...	...
Marasmus with skin condition,	1	...	...	1	...	...	...	...	...	...
Marasmus with rectal abscess,	1	...	...	1	...	...	...	...	...	...
Marasmus with vomit- ing,	1	...	...	1	...	...	...	...	...	...
Melaena,	1	...	1	...	...	...	...	...	...	...
Pneumonia,	23	9	...	6	1	...	...	...	...	7
Pneumonia with stom- atitis,	1	1	...	...	...	...	...	...	...	...
Prolapse of rectum, ...	1	...	1	...	...	...	...	...	...	...
Rickets,	25	21	1	...	...	...	...	...	1	2
Rickets with bronchitis	1	1	...	...	...	...	...	...	...	...
Septic conditions, ...	2	2	...	...	...	...	...	...	...	...
Skin conditions,	6	5	...	1	...	...	...	...	...	...
Stomatitis,	2	2	...	...	...	...	...	...	...	...
Tetany,	1	1	...	...	...	...	...	...	...	...
Tetany with septic conditions,	1	1	...	...	...	...	...	...	...	...
Underweight,	7	6	1	...	...	...	...	...	...	...
Underweight with rickets,	1	1	...	...	...	...	...	...	...	...
TOTAL,	158	94	11	28	2	1	1	1	1	19

Three cases of infectious disease occurred during the year.

One case of diphtheria was transferred to Gateside Hospital, and one case of chickenpox was sent home. One case of ophthalmia neonatorum was treated in hospital.

MIDWIVES (SCOTLAND) ACT, 1915.

BIRTHS :—

Total number of births (notified).	Total number of deaths of new-born children (within 10 days).	Number of births attended by midwives.	Number of deaths of new-born children (within 10 days) occurring in the practice of midwives.	Number of cases not attended by doctor or midwife.	
				Births.	Deaths.
1,925	54	1,468	42	Nil.	Nil.

CASES OF OPHTHALMIA NEONATORUM :—

Total number of cases.	Number of cases occurring in the practice of midwives.	Number of cases occurring where confinement not attended by doctor or midwife.
60	48	Nil.

CASES OF PUERPERAL SEPSIS :—

Total number of cases.	Total number of deaths.	Number of cases occurring in the practice of midwives.	Number of deaths occurring in the practice of midwives.	Number of cases occurring where confinement not attended by doctor or midwife during 1930.	
				Cases.	Deaths.
4	Nil.	2	Nil.	Nil.	Nil.

CASES OF PUERPERAL PYREXIA.

Total number of cases.	Total number of deaths.	Number of cases occurring in the practice of midwives.	Number of deaths occurring in the practice of midwives.	Number of cases occurring where confinement not attended by doctor or midwife during 1930.	
				Cases.	Deaths.
30	1	18	1	Nil.	Nil.

CASES OF STILLBIRTH (DEAD BORN CHILDREN):—

Total number of cases during 1930.	Actual number of cases occurring in the practice of midwives during 1930.
85	51

Of the cases, 20 occurred in Togo House Maternity Hospital where abnormal cases are treated.

CASES OF EMERGENCY:—

There were 462 cases of emergency, namely:—

Abdominal pain, 2; Abortion, 3; Ante-partum hæmorrhage, 18; Anaemia and debility, 5; Arthritis of knee joint, 2; Doubtful pregnancy, 1; Eclampsia, 2; Hæmorrhoids, 1; Leucorrhœa, 1; Miscarriage, 6; Oedema of face and hands, 3; Oedema of vulva, 3; Phantom tumour, 1; Prolapse of bladder and rectum, 1; Pro- of uterus, 2; Varicose veins, 1.

Abnormal presentation, 2; Arm presentation, 1; Breech presentation, 17; Contracted pelvis, 27; Delay in labour, 86; Foot presentation, 3; Hand presentation, 1; Impacted head, 2; Occipito-posterior presentation, 2; Prolapse of cord, 3; Shoulder presentation, 1; Transverse presentation, 2; Triplets, 1; Twins, 7; Twins (1 Stillborn), 2; Uterine inertia, 4.

Abdominal pains, 10; Adherent placenta, 4; Adherent placenta with post-partum hæmorrhage, 1; Albuminuria, 1; Collapse, 4; Eclampsia, 1; Epilepsy, 1; Headache and vomiting, 2; Influenza, 3; Mastitis, 1; Oedema of legs, 4; Phlegmasia alba dolens, 2; Placenta prævia, 6; Post-partum hæmorrhage, 2; Pyrexia, 21; Respiratory conditions, 4; Retained membranes, 1; Retained placenta, 5; Rise of pulse, 1; Torn perineum, 80.

Asphyxia livida, 1; Asphyxia pallida, 1; Cleft palate, 1; Club foot, 1; Club foot with spina bifida, 1; Congenital debility, 1; Convulsions, 3; Eye conditions, 5; Hæmorrhage, 1; Illness of child, 16; Jaundice, 2; Phimosis, 1; Polypus of gums, 1; Premature child, 18; Premature child with unhealthy placenta, 1; Spina bifida and imperforate anus, 1; Stillbirth, 22; Tongue-tie, 3.

NOTIFICATIONS—

The following notifications required under the rules of the Central Midwives' Board and the Public Health (Ophthalmia Neonatorum) Regulations (Scotland), 1918, were received:—

Notification of stillbirth,	..	...	...	49
Notification of having advised artificial feeding,	..			10
Notification of death,	...	...	...	29
Notification of having laid out a dead body,	..			28
Notification of liability to be a source of infection,	...			3
Notification of ophthalmia neonatorum,	...	..		48

SUPERVISION—

Fifty-four midwives notified their intention to practice within the burgh, but only 32 were actually in practice. Of the latter 27 resided in the burgh of Greenock, 4 in the burgh of Port-Glasgow, and one in the burgh of Gourock.

One hundred and forty-one supervisory visits were made by the Inspectors of Midwives during the year, and the work of the majority of the midwives was found to be quite satisfactorily performed.

VENEREAL DISEASES.

MALES.—

There was no outstanding change in the arrangements for the treatment of patients in the special treatment centre, Greenock Royal Infirmary, during the year.

The alterations in the present building to allow of satisfactory irrigation accommodation, and the provision of a Sitz bath, were completed and the additional facilities have proved of great benefit to both staff and patients.

The following table gives comparative figures for the years during which the clinic has been in operation:—

Year ending 31st December.	New Cases.	Attendances at Clinics.	Attendances at Centre.	Total Attendances.
1923	182	1,592	5,970	7,562
1924	160	2,054	6,436	8,490
1925	178	2,363	7,707	10,070
1926	176	2,923	10,118	13,041
1927	189	2,845	11,245	14,090
1928	194	3,083	11,468	14,551
1929	182	3,373	7,188	10,561
1930	179	3,043	7,351	10,394

Two hundred and thirty-three specimens of blood were examined by the Wassermann test in the Public Health laboratory, Glasgow, while 53 scrapings for spirochetes, and 1,122 smears for gonococci were dealt with in the centre.

The different types of cases dealt with were as follows:—

Type of Case.	On register 16th May, 1930.	New Cases	Ceased to attend.	Transferred to other centres.	Discharged.	Remaining 15th May, 1931.
Syphilis, ...	68	34	30	3	...	69
Gonorrhoea, ..	34	77	38	11	25	37
Soft chancre, ...	...	6	2	2	2	
Mixed infections,	3	...	2			1
Other conditions, (non-venereal),	3	70	..	2	66	5

Nine patients were admitted to Craw Road Hospital, Paisley, for treatment, and the average stay per patient was 30 days.

FEMALES.—

The clinic at Craigieknowes continued to give satisfactory service during the year, and the number attending, although not so great as it might have been, is very encouraging for a new clinic of this type. Acute and recent infections have not been numerous, but these will doubtless come for treatment as the existence of, and the benefit which can be obtained at the clinic, become better known.

Miss Noon of the Greenock and District Nursing Association left in July, and the nursing duties were thereafter taken over by Miss Duncan, of the department's health visiting staff.

The following Table shows the attendances during the year:—

Period under Review.	New Cases	Attendances at Clinics.	Attendances at Centre.	Total Attendances.
24th November to 31st December, 1929.	12	107	7	114
1930.	100	1,209	127	1,336

One hundred and sixty specimens of blood were examined by the Wassermann test at the Public Health Laboratory, Glasgow, while 164 smears were examined at the centre.

The following Table gives information regarding the type of cases:—

TYPE OF CASE.	On Register 16th May, 1930.	New Cases.	Ceased to attend.	Transferred to Other Centres.	Discharged.	Died.	Remaining 15th May, 1931.
Syphilis, - -	32	28	21	—	—	1	38
Gonorrhoea, - -	10	18	13	1	2	—	12
Mixed Infections, - -	—	2	—	1	—	—	1
Other Conditions, (non-venereal), - -	—	41	2	—	32	—	7

One patient was admitted to Craw Road Hospital, Paisley, for treatment which entailed a period of 80 days residence: she had not been discharged at the end of the year.

HOSPITAL ACCOMMODATION AND AMBULANCE ARRANGEMENTS.

GREENOCK AND DISTRICT COMBINATION HOSPITAL, GATE-SIDE—

Splendid service was rendered by the Hospital during the year, and no great difficulty was encountered in gaining admission for cases requiring treatment.

I am indebted to the Medical Superintendent for the following information regarding the treatment of cases, and the results obtained:—

I.—CASES TREATED CLASSIFIED ACCORDING TO DISEASE.

DISEASE.	Cases in Hospital 1st January, 1930.	Admitted during 1930.	Discharged during 1930.	Died in Hospital.	Cases remaining in Hospital 31st December, 1930.	Fatality Rate.
Diphtheria, ...	25	174	185	5	9	2.5
Erysipelas, ...	...	13	10	2	1	15.3
Scarlet Fever, ...	39	338	322	6	49	1.5
Puerperal Fever, ...	...	19	16	...	3	...
Measles, ...	...	28	24	4	...	14.2
Tuberculosis, ...	27	75	66	26	10	25.4
Others, ...	1	80	63	7	1	8.6
Total,	92	727	686	60	73	7.3

II.—CASES CLASSIFIED ACCORDING TO DISTRICTS FROM WHICH ADMITTED.

DISTRICT.	Cases in Hospital 1st January, 1930.	Admitted during 1930.	Discharged during 1930.	Died in Hospital.	Cases remaining in Hospital 31st December, 1930.
Greenock, ...	75	597	564	51	57
Gourock, ...	13	69	69	1	12
Port-Glasgow, ...	4	56	49	7	4
County, ...	...	5	4	1	..
Total,	92	727	686	60	73

III.—AVERAGE PERIOD OF RESIDENCE OF PATIENTS DISCHARGED DURING 1930.

DISEASE.	Discharged during 1930.	Aggregate Number of Days' Residence.	Average Days' Residence.
Scarlet Fever, ...	322	10,523	38
Diphtheria, ...	185	6,791	37
Tuberculosis, ..	66	6,724	101

IV.—CASES ADMITTED FROM THE BURGH OF GREENOCK CLASSIFIED ACCORDING TO DISEASE.

DISEASE.	Cases in Hospital 1st January, 1930.	Admitted 1930.	Discharged 1930.	Died 1930.	Cases remaining 31st December, 1930.	Fatality Rate.
Diphtheria, ...	16	122	128	3	7	2.1
Erysipelas, ..	...	9	7	1	1	11.1
Scarlet Fever, ...	31	285	275	6	35	1.8
Puerperal Fever, ...	...	16	13	...	3	...
Measles, ...	...	26	23	3	...	11.5
Tuberculosis, ...	27	75	66	26	10	25.4
Enteric Fever, ...	...	23	19	4	...	17.3
Whooping Cough, ...	...	8	5	3	...	37.5
Pneumonia, ...	...	12	8	4	...	33.3
Other Diseases. ..	1	21	20	1	1	4.5

WEST RENFREWSHIRE COMBINATION SMALLPOX HOSPITAL.

No cases of smallpox occurred during the year, and there was no necessity to make use of the hospital. All arrangements regarding it remain unchanged.

GENERAL.—The burgh is on the whole fairly well supplied with hospital accommodation, with a few notable exceptions.

The beds available at the Greenock Royal Infirmary for general medical and surgical cases emergencies and accidents appear to be more or less adequate. There is, however, some considerable difficulty and delay in getting gynaecological cases dealt with, and many of those go elsewhere for treatment, a considerable number of women from the burgh having been treated in the Samaritan Hospital, Glasgow, during 1930. In this connection it should be

a matter for consideration by the Corporation whether, in co-operation with the Greenock Royal Infirmary, beds should not be provided in conjunction with an extended maternity hospital for cases of this nature. Apart from these special cases, however, enquiry has elicited the information that a considerable number of Greenock patients are receiving treatment in the various Glasgow voluntary hospitals.

The accommodation for the ordinary infectious diseases at Gateside Hospital is probably adequate as far as the number of beds goes, but, with the ever increasing list of diseases liable to be treated there, it is very difficult, and at times impossible, to make full use of the accommodation. More beds for the treatment of cases of pneumonia, measles and whooping cough are urgently required. This matter has already been brought to the notice of the Hospital Board, and it was found that a certain amount of ward space was available, but that increased staff and additional accommodation for them would be required: action was deferred until it was seen what change might be brought about in hospital policy by the Local Government (Scotland) Act. The question should now, however, be gone into again, and suitable and adequate arrangements made.

The maternity hospital might be said to constitute on the whole adequate provision for cases of obstetrical emergency, although it is on occasion taxed beyond the limit. There are, however, no isolation beds for suspicious cases of sepsis which are more liable to occur in complicated confinements such as are dealt with there, and it is a matter for congratulation that no secondary cases have so far occurred. Furthermore the hospital does not meet the needs of those mothers requiring ante-natal treatment, of or certain uncomplicated cases housed in poor surroundings. The extension of the hospital to provide for those types of cases requires the earnest consideration of the Local Authority.

Smithston Hospital probably provides sufficient accommodation for the burgh poor law medical cases requiring indoor treatment, but it cannot be said to conform to present day general hospital standards either in accommodation staffing or equipment. There is at present, however, being tentatively discussed the re-organisation of all local authority hospitals on a county basis, and in view of that it might be well to make no radical changes meantime, but as long as this institution houses able-bodied poor, sick poor, aged and infirm persons, maternity cases, epileptics and insane persons under the same roof, it can never be an efficient and satisfactory hospital.

Accommodation for marasmic and rickety children is provided in the Children's Hospital, but the premises are now neither adequate nor suitably situated for the purpose. The question of a new hospital has been considered by the Child Welfare Association, but the present was not deemed an opportune time for launching a larger scheme. The work carried out at the hospital is nevertheless very valuable indeed. There are 22 beds available in the Royal Infirmary for children, but these do not deal to any extent with the problem of the ailing child, being mostly for surgical and acute medical illnesses.

The Children's Convalescent Home of 16 beds fulfils a very useful function in the community, but it is doubtful whether the accommodation is sufficient to meet the needs of all those requiring convalescence after illness. No provision whatever is made for adult convalescents, except Larkfield Hospital, which deals only with persons who have been under treatment in Greenock Royal Infirmary, and there is a real need for beds for anæmic and debilitated mothers following confinement, who constitute a considerable proportion of those attending the post-natal clinics.

The Eye Infirmary appears to provide services adequate to the needs of the community.

The Ear, Nose and Throat Dispensary fulfils the need for out-patient services in this speciality, but its work is badly handicapped for lack of in-patient accommodation. Certain operation cases are being dealt with by the dispensary staff in the wards of the Greenock Royal Infirmary, but this arrangement can never be wholly satisfactory. It is understood that consideration is at present being given to the problem of providing suitable in-patient accommodation.

LIST OF HOSPITALS.—

NAME.	SITUATION.	MANAGEMENT.	PURPOSE.	Number of Beds.
Greenock Royal Infirmary,	Duncan St ..	Voluntary, ..	General, ..	154 beds 13 cots
Larkfield Hospital, ...	Larkfield Rd.	Voluntary, ..	General Con- valescent, ..	26 beds 6 cots
Children's Hospital, ...	Shaw Place,	Voluntary, ..	Medical. Child- ren under 5.	22 beds
Children's Convalescent Home	South Street,	Voluntary, ..	Convalescent. Children 5-14 years, ...	16 „
Smithston Institution,	Inverkip Rd.	Local Auth- ority, ..	General medi- cal, maternity, insane, tuber- culosis, ...	376 „
Gateside Infectious Dis- eases Hospital, ...	Auchneagh Road. .	Local Authority.. Combination	Infectious dis- eases, tuber- culosis, ...	119 „
Smallpox Hospital, ...	Johnstone, .	do.	Smallpox, ...	32 „
Craw Road Institution,	Paisley, .	Paisley Town Council, ...	Venereal dis- eases, ..	4 „
Togo House Maternity Hospital,	Dempster St.	Local Auth- ority, ..	Maternity, ..	6 „
Eye Infirmary,	Nelson St., ..	Voluntary, ..	Diseases of Eye	13 „ 2 cots
Little Sisters of the Poor,	Union St., ...	Voluntary, ..	Infirm chronic,	45 beds

AMBULANCE ARRANGEMENTS.—

Two ambulance vehicles are available for general purposes including accidents. A charge is made for the use of the ambulance except in the case of street accidents. These vehicles are managed by the Police Department.

Gateside Infectious Diseases Hospital has one ambulance vehicle available for the use of the institution.

The West Renfrewshire Smallpox Combination Hospital has one vehicle available for the purpose of the institution.

One ambulance vehicle is available for the removal of poor law cases to Smithston Hospital.

OUT-PATIENT FACILITIES.

The following is a list of the out-patient clinics provided by the Local Authority: there are none provided by other bodies on the Corporation's behalf.

NAME.	ADDRESS.	ACCOMMODATION.	MANAGEMENT.
Maternity and Child Welfare Clinic,	Shaw Place.	Consulting, waiting, and weighing rooms. ..	Local Authority.
Craigieknowes Maternity & Child Welfare Clinic, ...	Sinclair Street.	Consulting, waiting and weighing rooms, ..	do.
Male Venereal Diseases Clinic,	Royal Infirmary.	Waiting, treatment, irrigation and consulting rooms	do.
Craigieknowes Female Venereal Diseases Clinic, ...	Sinclair Street.	Waiting and treatment rooms.	do.
Tuberculosis Dispensary, ..	Terrace Road.	Waiting, consulting and light rooms.	do.

MEDICAL CARE AND NURSING OF THE SICK POOR.

On 16th May the Corporation took over the duties of the Parish Council, and, as far as this department was concerned, the change took place with the greatest goodwill, and thanks are due to the officials of the Parish Council who co-operated so loyally at a rather difficult time.

It was resolved by the Corporation to make no radical change in the existing arrangements until experience of one year had been gained in the working of them. The Medical Officer of Health, however, became the medical administrative head of Smithston Institution.

(1). NURSING SERVICE.

Any patients on the poor roll requiring nursing care are referred by the medical practitioner in charge to the Greenock and District Nursing Association, and are dealt with as part of the general work carried out by the nurses of that body. A special grant in respect of this work was made by the Parish Council, and this has been continued under the new regime.

(II). DOMICILIARY MEDICAL SERVICE.—

For this purpose the burgh is divided into four districts, each consisting of two municipal wards, and one out-door medical officer is responsible for the work in each district. The person desiring medical relief makes application to the Public Assistance Officer, who refers him to the appropriate doctor for examination and classification, and if the application is granted, the patient comes under that doctor's care until further attendance is unnecessary. Drugs are prescribed on special forms, which are priced by the Checking Bureau. In cases of insanity, the district medical officers carry out the certification in cases unable to pay for treatment.

Only persons on the poor roll are entitled to medical relief, and medical services are not generally available to the dependants of insured persons. Under special circumstances, however, medical attendance may be granted to non-poor law cases.

(III). INSTITUTIONAL MEDICAL ARRANGEMENTS.—

All poor law cases requiring indoor medical treatment are accommodated in Smithston Institution. This institution houses in the same building ordinary poor, aged and infirm, epileptics, lunatics, ordinary sick, and maternity cases.

The hospital section consists of 100 beds—46 male and 40 female—while 5 are nominally reserved for maternity cases, and 9 for aged and infirm persons. No acute surgical cases requiring operation are admitted, these being dealt with by the voluntary hospitals. An operating theatre, however, is provided, and in cases of necessity a surgeon is called in to carry out any urgent surgical procedure which cannot otherwise be dealt with. A considerable number of patients are suffering from chronic illness, and the actual amount of available accommodation is not nearly so large as the figure given would indicate. Furthermore there are usually a certain number of boarders from other neighbouring areas.

The asylum section consists of 250 beds—137 male and 113 female—and the whole accommodation is usually taken up. A Resident Medical Officer is in charge of these patients, and also acts as Medical Officer for the Poorhouse.

DR. LEGGETT'S ANNUAL REPORT ON GREENOCK PAROCHIAL ASYLUM.

I have the honour to submit the following report on the

Greenock Parochial Asylum for the year ending 31st December, 1930 :—

GENERAL STATISTICS—

On the 31st December, 1929, the number of patients on the asylum register was 253, of which 138 were men and 115 women. During the year under review 31 men and 16 women were admitted, so that the total number under treatment was 300—that is one more than last year.

The number discharged was 29; of these 20 left the institution as “recovered,” 5 were transferred to other asylums 3 were discharged as “not insane,” and one was discharged “not improved,” having become a private patient.

The number of deaths was 22.

The names of 249 patients remained on the register on the 31st December, 1930, of which 138 were men and 111 women, being a decrease of 4 women as compared with the corresponding date last year.

The daily average number resident was 250.

Four boarders were accommodated in the asylum for variable periods during the year, chargeable respectively to the Corporation of Glasgow, 2; County of Renfrew, 1; and one suspense case.

There were 5 service patients resident at the end of the year, 4 of whom belonged to the burgh of Greenock and one to the County of Argyllshire, no change having occurred either as regards numbers or individuals during the year. The cost of maintenance and of certain extras continues to be defrayed by the Ministry of Pensions, and this arrangement also applies to the case of an ex-service man not in the service patient's category. A visit was made by the Government Inspector on the 21st February, 1930. He commented very favourably on the condition of these men and the treatment afforded them.

ADMISSIONS—

The number of admissions was 47, consisting of 31 men and 16 women—that is a decrease of one man and ten women as compared with last year, and an increase of eight men and a decrease of seven women as compared with the previous year. Forty-two were admitted for the first time, and five were re-admitted. Of the latter four had two previous attacks, and the other one previous attack. One of the female admissions had been “boarded out” for eight years, and two males had been deported

from Canada. No patients were discharged and re-admitted during the year. Six of those admitted were between 70 and 80 years of age, one actually being 87, and three were in such a weak state of bodily health that they died within a short period after admission.

The following are the forms of mental disorder from which those who were admitted suffered:—

Melancholia, 12; mania, 8; congenital mental deficiency, 6; senile dementia, 5; dementia praecox, 4; organic dementia, 3; general paralysis, 2; encephalitis lethargica, 1; delusional insanity, 1; confusional insanity, 1; acute delirious mania, 1; "not insane," 3.

AETIOLOGY.

The ages of those admitted ranged from 15 to 87 years, and it will be noticed that almost twice as many men as women were admitted.

As regards causation, although accurate family histories are difficult to obtain on account of the reluctance of the relatives to give satisfactory information, and for other reasons, it is obvious, judging from the types of cases under consideration, and from the information available, that hereditary predisposition was present in about one third of the admissions.

Congenital deficiency was present in a marked degree in six, and epilepsy in two cases. Adolescence predominates as the period during which the largest number, 10, were affected by genuine mental derangement. Advanced senility accounted for the mental symptoms which resulted in the certification of 6, organic brain disease in 3, and alcohol, pregnancy, puerperal fever and the climacterium were exciting causes in one case each.

A history and evidence of venereal disease were present in five admissions, middle ear disease in two, and one was obviously suffering from the after effects of encephalitis lethargica.

In addition to the above, the mental anxiety and worry which arises as the result of unemployment, privation, ill-health and domestic trouble are important psychogenic factors in producing mental aberration and depression.

DISCHARGES—

The number of patients discharged during the year was 29; of this number 20 left the institution as recovered, 5 were transferred to the following asylums, viz.:—Paisley District Asylum,

Riccartsbar, 3; Argyll and Bute District Asylum, Lochgilphead, 1; and the lunatic wards of the Southern General Hospital, Glasgow, 1. Three were discharged as "not insane," and one was removed "unrecovered," being a private patient.

Of those discharged recovered, three left the asylum within three weeks, twelve within six months, one within a year, and two within eighteen months. The remaining two had been resident for four years and nine years respectively.

The recovery rate for the year calculated on all admissions including transfers from other asylums, is 42.5 per cent., which is remarkably good considering the unsatisfactory type of case admitted, and the immediate prospect of ultimate fitness for discharge.

Four patients were allowed out "on pass" for a period of 28 days in the care of their relatives, with a view to testing their fitness for definite discharge. All four succeeded in showing that they were sufficiently recovered to remain at home.

ESCAPES—

There were no escapes during the year.

DEATHS—

Fourteen men and eight women died during the year, being an increase of eight as compared with last year, and an increase of five as compared with 1928. The death-rate, calculated on the daily average number resident, is 8.8 per cent. This rate is slightly higher than usual, last year's rate being remarkably low.

The certified causes of death were as follows:—General paralysis of insane, 6; cerebral disease with epilepsy, 3; senile decay, 3; organic brain disease, 2; pleurisy, 2; acute nephritis, 1; pulmonary tuberculosis, 1; chronic cardiac disease, 1; valvular disease of the heart, 1; cirrhosis of liver, 1; lobar pneumonia, 1

During the year under review, six persons were admitted ranging in age from 71 to 87 years, and of the eight women who died, four of them were aged 75, 78, 79 and 86 respectively, and one man had been resident for 32 years. On the other hand, three patients were so seriously ill in a physical sense on admission that they lived only 4, 10 and 17 days.

In order to obviate the necessity for certifying as insane such cases, and also for discharging as "not insane" a number of others after a few days residence, the question of introducing observation wards would appear to be a matter of some urgency and importance,

and could be dealt with in conjunction with another very urgent matter, to which I have now specially to draw the attention of the Committee, viz., the state of overcrowding that exists in the asylum wards.

In this connection, and being aware that such matters are likely to come under discussion in the near future, it may not be out of place to remind the Committee that, in addition to making provision for the ordinary certifiable person, it is within the power of Local Authorities in Scotland under the Lunacy Acts, to provide accommodation for other types of mental cases. I refer to those who are described as voluntary patients, whose numbers in mental hospitals are increasing from year to year, and for whom housing accommodation will need to be provided sooner or later in order to keep abreast of the more enlightened and modern methods of dealing with mentally affected persons.

For a considerable time now efforts have been made to avoid subjecting certain types of cases to certification, and to induce them to enter institutions voluntarily for care and treatment. Some Local Authorities have agreed to provide facilities for this procedure as being the one which most nearly approaches admission to an ordinary hospital.

In suitable cases it is legal for a Medical Superintendent to admit to any asylum a person to whose written application for admission a Commissioner under the General Board of Control has already given assent in writing. Such patients cannot be detained for a longer period than three days after having given notice of their intention or desire to leave the asylum, provided they have not become certifiable in the meantime and the necessary medical certificates and Sheriff's warrant obtained to legalise compulsory detention.

The question of providing institutional accommodation locally for mental defectives will presumably come up for consideration.

Out-patient departments for the examination and treatment of mental illness have also been instituted in several centres in Scotland. These departments are intended for persons who may wish to seek advice, but not necessarily admission, and would be situated away from the asylum, possibly as an adjunct of the Public Health Department.

In the event of the Committee deciding to make any alteration in the existing arrangement for the housing of sick persons, the following reasons are suggested for providing additional accommodation for mental cases:—

- (a) Overcrowding in existing wards.
- (b) The necessity for observation wards.
- (c) Separate wards for voluntary patients.
- (d) The housing and segregation of mental defectives.

HEATING AND HOT WATER SUPPLY—

I am of opinion that the custom of cutting off the steam heating between 8 p.m. and 4 a.m. should be discontinued, as being not only unnecessary, but a source of considerable inconvenience throughout the Institution. In addition to the coldness of some of the wards on the east side of the building during severe wintry weather, there is also the fact that the sick and observation wards, where there are a number of patients who are very faulty in their habits, are left without a hot water supply for cleansing purposes of any kind.

The whole question of heating and hot water supply requires investigation with a view to having the steam kept on continuously, but regulated during the night to the minimum required for keeping the wards and dormitories at a comfortable temperature, and to ensure a sufficient supply of warm water.

SPECIAL ILLNESSES—

No form of illness of an epidemic nature occurred during the year amongst the patients.

Thirteen members of the staff were off duty through illness for varying periods during the year.

STAFF—

Mr John Urquhart was off duty on account of serious illness from 20th November until 31st December, at which date he left the service under the Asylum Officers' Superannuation Act after 34 years' service.

Attendant Archd. McLellan was also superannuated and left the service on the 15th December after 26 years' service.

Mr William Watson of Gartloch Mental Hospital was appointed Head Attendant on the 19th December. Attendant John A. Campbell was appointed Senior Charge Attendant on the same date.

The usual lectures and other forms of tuition were provided for the members of the nursing staff who were eligible to compete at the nursing examination of the Royal Medico-Psychological Association. It is necessary that all nurses, male and female,

should enter for the preliminary examination after one year's service and for the final examination after 2½ to 3 years' service and training. One female and four male nurses passed the final examination in May—the female nurse passing with distinction—one male and two female nurses passed the preliminary examination in the same month, and one male and four female nurses passed the final examination in November—one male and three female nurses passed with distinction—so that during the year 10 nurses obtained the certificate of proficiency in mental nursing, of whom 50 per cent. qualified with distinction. This is a very creditable and probably unequalled performance. There were no failures, so that the staff continues in its usual state of efficiency in the matter of examinations; every member of the staff who is eligible as regards length of service holds the certificate. It is only fair to record that the nursing staff as a whole has given excellent service to the patients and asylum in a practical sense during the year.

ENTERTAINMENTS—

The usual weekly dances and monthly concerts have been held during the winter months and motor bus excursions and picnics during the summer.

These various forms of entertainment are greatly appreciated by the majority of the patients, as they provide a welcome relief from the irksome and tedious monotony necessarily associated with any form of compulsory confinement.

A number of visits have been paid to the wards by Miss McKirdy and the ladies of the Brabazon Society, who have provided entertainment in the form of tea parties, music, singing and literature. These ladies are very kind and pleasant in their attitude towards the patients, and take a great deal of trouble in the matter. Their visits are a source of much interest and enjoyment in every respect. Our thanks are also due to those friends who come out to entertain at the end of each month.

A number of male patients under the supervision of attendants continue to be usefully employed in the garden, grounds and wards, and a similar number of female patients in the laundry and throughout the wards with needlework and household work. Employment is always helpful, so long as it is properly regulated and supervised in each individual case, and no undue hardships or exposure permitted.

Fifteen patients are allowed "parole" in the grounds about the Institution, and four outside the grounds.

I have much pleasure in acknowledging the loyal support of the various members of the staff who have assisted me so ably in the care and treatment of the patients, especially those who have had charge of the bodily sick as well as mentally sick.

H.M. Commissioner of the Board of Control paid official visits on the 16th April and 11th August. Favourable reports were made after each visit.

In conclusion I wish to express my appreciation and thanks to the Convener, Members of the Committee, and to the Medical Officer of Health for the support and assistance which I have received in carrying out my duties during the latter part of the year.

DR. LEGGETT'S ANNUAL REPORT ON SMITHSTON POORHOUSE.

I beg to submit the following report on the condition and administration of the Poorhouse for the year ending 31st December, 1930, on the lines indicated in the Board of Health Circular No. VI., 1923:—

The accommodation for sick inmates continued to be somewhat stressed at certain periods during the year, but actual overcrowding was successfully avoided. The number of beds provided in the female section was adequate for ordinary sick and senile cases. Since, however, it continues to be necessary to admit maternity cases, infants and sick children to the same or adjoining wards, the accommodation available cannot be considered satisfactory.

There were 91 patients in the hospital wards on the 31st December, 1929. During the year under review 297 patients were admitted, making a total of 388 under treatment.

Inmates who are acutely ill are seen three times, and, if necessary, more frequently every day by the Medical Officer; those who are ill, but not acutely so, at least twice daily, and those who report themselves, or are reported as requiring medical attention, are inspected at once and treated or admitted to hospital.

The classification of inmates is considered a matter of daily routine.

The dietary of the hospital patients should be revised at an early date, as some improvement is desirable.

There continued to be difficulty during the year in keeping the hospital staffed with a sufficient number of suitably trained nurses, and it has been necessary to employ a number who do not hold certificates. The accommodation provided for them is sufficient and suitable.

The supply of medicines and medical appliances is sufficient.

The general equipment of the wards is satisfactory and the bathing of the sick is regularly carried out. Considerable inconvenience and some difficulty are, however, experienced in carrying out the bathing in the hospital wards at times on account of the existing arrangement for the supply of hot water. Hot water is not always available during the day, and never after 10 p.m.

The wards are well heated during the day and ventilation receives careful attention.

The sanitary arrangements are satisfactory.

The question of providing accommodation for maternity cases and sick children separate from the ordinary sick might be considered with advantage in both classes.

Offensive cases such as Itch are isolated in the probationary wards. By arrangement between the Medical Officer of Health and the Inspector of Public Assistance all patients who apply for admission, certified by an outside doctor as suffering from tuberculosis, are accommodated in the tuberculosis pavilion until examined by the Medical Officer of Health, who decides the disposal of the case. All inmates who are, in the opinion of the Resident Medical Officer, suffering from tuberculosis are notified and are seen by the Medical Officer of Health as soon as possible. Infectious fevers go to Gateside Hospital.

Cases of venereal disease are sent for treatment to the V.D. centre in Greenock.

The services of a surgeon in Greenock may be requisitioned where major operative measures appear to be necessary, and cases are admitted to the Royal Infirmary if suitable and accommodation there available.

The great majority of cases of cancer admitted are inoperable. When a case arises where surgical treatment is considered necessary and justifiable, a surgeon from Greenock is called upon to deal with it.

Obstetric cases are in the first instance sent to the maternity ward for supervision and examination, especially for albuminuria and pelvic measurements by a C.M.B. nurse, who reports to the Medical Officer on the patient's condition. The Medical Officer thereafter, at the earliest opportunity, examines the patient's general condition with a view to ascertaining the possible presence of disease, and in advanced cases, the presentation. The results of examination are recorded in a book kept for the purpose. The process of parturition takes place under the supervision of the Medical Officer a nurse holding the C.M.B. qualifications, and usually a second nurse.

Suitable silver salt is instilled into the eyes of the newly born as a matter of routine.

The ultra-violet ray apparatus continues in daily use with much advantage.

BACTERIOLOGICAL EXAMINATIONS.

All bacteriological examinations of specimens connected with infectious disease were, as formerly, examined by the Medical Superintendent of Gateside Hospital.

The following table gives the numbers, suspected cause and results of the examinations made:—

Nature of Specimen.	Suspected Cause.	Positive.	Negative.	Total.
Throat mucus, ...	Diphtheria, ...	77	493	570
Throat mucus, ...	Cerebro-spinal Meningitis,	1	21	22
Cerebro-spinal fluid,	Cerebro-spinal Meningitis,	...	3	3
Sputum, ...	Pulmonary Tuberculosis,	38	217	255
Blood, ...	Enteric Fever, ...	25	50	75
Uterine discharge,	Puerperal Fever, ...	...	1	1
Discharge from eye,	Gonococcal Ophthalmia,	...	1	1
Discharge from ear,	Exam. for organisms,	...	1	1
Pus, ...	" " "	...	3	3
Urine, ...	" " "	...	1	1
Pleural fluid, ...	Tuberculosis, ...	...	1	1
Total, ...		141	792	933

No further action has been taken with regard to the proposal to institute a Corporation laboratory. This matter is really contingent on the provision of other and suitable premises for the offices of the department. The present offices are in many ways very unsatisfactory, and the question should receive the early consideration of the Corporation.

SERA, VACCINES, AND INSULIN.

ANTI-DIPHTHERIA SERUM.—The emergency supply of diphtheria antitoxin at the Public Health Office and the Police Station was kept up during the year. Eighty-four thousand units were purchased during the period at a cost of £4 16s 9d.

ANTI-MENINGOCOCCUS SERUM.—As the existing stock of this serum has become time expired, 225 ccs. were purchased at a cost of £2 14s 7d.

T.A.B. VACCINE.—Twelve doses of T.A.B. vaccine were purchased at a cost of £1 12s 7d, but none was used during the year.

INSULIN.—Fifteen thousand units were purchased through the Department of Health at a cost of £10 2s 3d, and twelve thousand nine hundred units were supplied to three patients under the approved arrangements.

PORT SANITARY ADMINISTRATION.

During the year 1930 sixty-six inward bound liners from Canada were boarded by the staff of the department; fifty-four of these ships arrived outwith the usual office hours. This is the largest yearly number of calling passenger vessels on record, the figures being as follows:—

1924,	...	...	...	12
1925.	...	...	...	24
1926,	...	...	...	20
1927,	...	...	...	28
1928,	...	...	...	49
1929,	...	...	..	63
1930,	...	...	...	66

The total number of passengers landed from these ships was 9,555, of whom 1,700 were aliens and 60 aliens in transit to other countries. One hundred and thirty-six aliens were examined at the request of the Immigration Officers, and in one case a medical certificate was issued. Three cases of chickenpox, one of measles, one of lobar pneumonia and one of tuberculosis of the hip were removed to Gateside Hospital, and one case of heart disease, one of pneumonia and a child suffering from a febrile illness were removed to Greenock Royal Infirmary, while one woman was sent to Togo House Maternity Hospital suffering from threatened eclampsia. One case of whooping cough also was taken to Gateside Hospital from an outward bound liner. In addition to these, five mental deports were taken charge of by the Public Assistance Department.

The Public Health (Deratisation of Ships) Regulations (Scotland) 1929, came into force on 1st January, 1930, and during the year every ship coming from abroad was visited as soon as practicable by a member of the staff. In connection with this matter the thanks of the department are due to the Harbour Trust Officials for the provision of information and constant co-operation. Seventy-two ships were thus visited in the harbours of the burgh, and a general survey was carried out in each case. The cargo discharged by these vessels was as follows:—Sugar 45; Timber 5; Linseed and Cotton Seed 4; Phosphates 2; Molasses 2; Steel 1; Peanuts 1; while nine ships entered the harbours for overhauling and repair, two for bunkers, and one ship came in ballast to load sugar for Russia.

Rat guards or tarred canvas on hawsers and other necessary measures to prevent rats leaving the ships were insisted upon in every case.

Of these 72 ships, 61 produced valid deratisation certificates, although all of those were not issued in accordance with article 12 of the International Sanitary Convention of Paris: 6 produced valid deratisation exemption certificates and two could not produce any certificate, but particulars of the certificate were given. In one case the original certificate had been lost and in the other case it was stated that the document had been removed by a port authority abroad. Three of the ships produced deratisation certificates which were not valid, and in one case the ship was examined and an exemption certificate issued: in the other two fumigation was to be carried out forthwith when the vessels docked for overhaul, as they were then proceeding to do. One ship asked for fumigation although she held an unexpired certificate: this was carried out by means of sulphur, fourteen dead rats being found, and a deratisation certificate was issued.

The health of the crews was on the whole very good. Any necessary hospital treatment was arranged for, two patients being admitted to Gateside Hospital. One officer was found to be suffering from an indefinite illness, clinically suspicious of enteric fever. He refused hospital treatment, and was allowed to proceed to his home, where the diagnosis was confirmed.

The Parrots (Prohibition of Import) Regulations (Scotland) 1930, came into operation on 20th May. Three notices under the regulations were issued, and in each case the necessary undertaking was received: in addition one bird was destroyed by the owner on leaving the ship.

DISINFECTION.

HOUSE DISINFECTION.

No change was made in the arrangements for house disinfection during the year, and the use of Izal and Formalin as a spray was found to be quite satisfactory.

Twenty-one disinfections were carried out following diseases which were not considered infectious, and appropriate charge was made.

DISINFECTING STATION.

The work at the disinfecting station was carried out on the same general lines as in past years, and the plant gave excellent service during the period. Several parts of the machinery were subjected to overhaul, and six new hot water taps were fitted in the wash-house, while the incinerator and chimney stack were repointed. The steam boiler was inspected and found to be in order.

The number of articles dealt with totalled 13,888, and of these 12,923 were disinfected and washed, 410 were disinfected only, while 555 were destroyed. Of the articles disinfected, 6,222 were subjected to steam under pressure, and 7,111 were disinfected with antiseptic solution.

The Clayton apparatus was not in use during the year.

RECEPTION HOUSE.

It was not necessary during the year to use the Reception House to any great extent for the isolation of contacts of infectious disease. Twelve families comprising 35 persons were housed for periods amounting in all to 140 days, the average stay per person being 4 days. Nine of these persons were taken to the Reception House to allow of disinfection after scarlet fever, and three to allow of disinfection after diphtheria, while five were admitted for cleansing and disinfection on account of vermin infestation.

The remainder, 18 persons, were admitted in order that satisfactory disinfection of house, bedding and personal clothing might be carried out on account of scabies, the disease being treated while the persons were in residence. This procedure is carried out in certain types of cases where chronic re-infection appears to be occurring. It is a useful measure, but must of necessity be limited in its scope as young children cannot be housed in the Reception House unless under the control of their parents, no staff being available to look after them.

The premises were also used in the beginning of the year as a distribution centre for soup from the communal soup kitchen.

MILK AND DAIRIES.

During 1930 a beginning was made with the full investigation and supervision of the methods of milk production and storage in the burgh. On the whole the methods of production were found to be of a fairly satisfactory character, but the same could not be said of those in vogue in retail milk shops. A large number were visited, advice, and, where necessary, warning given, and these measures have produced a considerable improvement as far as one is able to judge. It has not yet been found possible to institute a scheme of routine bacteriological examinations for the control of method, but it is hoped that satisfactory arrangements will be made during next year. Sixty-four samples for bacterial count were taken, however, fifteen from producers, and fifty from retail shops. Producers' counts varied from 27,500 to 1,740,000 organisms per cubic centimetre, with an average of 316 500, and the retailers' from 38,000 to 11,120,000, with an average count of 1,478, 000. These findings do not reveal a very satisfactory state of affairs.

A full survey has been made of dairy premises, and it will now be possible to take definite action for their improvement.

No cases of infectious disease spread by milk were encountered, and no difficulty was experienced in dealing with cases occurring at milk producing premises. It was not found necessary to stop the milk supply from any dairy farm or milk-shop during the year.

The Veterinary Inspector reports that the standard of cleanliness of cows in the district is generally a very satisfactory one. One thousand one hundred and eight cows were examined. Six were found to be suffering from inflammation of the udder, and one from abscess in the udder, the use of the milk from these cows was prohibited until the condition had cleared up. Fifteen samples of milk were taken from cows with abnormal udders and subjected to the inoculation test for tuberculosis—in one case with positive result. One cow was found affected with tuberculosis of the udder, and one with tuberculous emaciation, and both of these were destroyed under the Tuberculosis Order of 1925.

Fourteen samples of mixed milk consigned from outwith the burgh were collected and examined by guinea pig inoculation for tubercle bacilli with negative result.

MEAT INSPECTION.

The work at the slaughterhouse continued to be satisfactory and the arrangements for meat inspection during the year remained unaltered.

I am indebted to Mr Peter McIntyre, M.R.C.V.S., Veterinary Inspector, for the information given in the following table :—

CLASS.	Number Slaughtered.	Number affected with Tuberculosis.	Percentage affected with Tuberculosis.	Whole Carcases seized for Tuberculosis.	Parts of Carcases seized for Tuberculosis.	Whole Carcases seized for diseases other than Tuberculosis.	Parts of Carcases seized for diseases other than Tuberculosis.
Bullocks	2,436	200	8.2	4	10	—	1
Bulls,	137	51	27.2	3	4	1	—
Cows,	744	471	63.3	29	33	4	9
Heifers,	915	126	13.7	3	5	3	10
Swine,	1,966	149	7.5	4	2	8	12
Sheep,	12,237	—	—	—	—	15	7
Calves,	1,919	5	0.26	5	—	23	2
Total,	20,354	1,002	4.92	48	54	54	41

The following is the list of conditions other than tuberculosis which were responsible for the total or partial seizure of carcases :—

Total Seizure.—Cancer, 1; decomposition, 14; diamonds, 1; dropsy, 5; emaciation, 5; enteritis, 1; fevered flesh, 7; gastritis, 1; immaturity, 1; imperfectly bled, 1; injuries, 2; jaundice, 2; melanosis, 1; peritonitis, 5; pleurisy, 1; pyæmia, 2; septic pneumonia, 1; umbilical pyæmia, 3.

Partial Seizure.—Abscesses, 3; adhesions, 1; arthritis, 3; injuries, 28; mastitis, 1; melanosis, 1; paralysis, 1; peritonitis, 5.

HOUSING AND TOWN PLANNING.

I have to thank the Master of Works for the information that only five houses were certified for occupancy during the year, two bungalows of four, and one of six apartments, and two semi-detached cottages of four apartments. No Corporation houses were certified during 1930.

The number of houses inspected during the year under the Housing (Inspection of District) Regulations (Scotland), 1928, was 676, of which 654 were situated in the Central Area.

Three representations were made to the Local Authority by the Sanitary Inspector with respect to 22 dwellinghouses, of which twenty were occupied. The occupied houses comprised eleven of one seven of two, one of three, and one of four apartments, one of the two apartment houses being occupied by two families. A total of 91 persons were displaced by the closure of these houses.

The sub-letting of houses in the Sinclair Street area which was referred to in last year's report had not decreased at the end of the year, but actually appeared to have become more widespread. It is hoped that some further action to stop this practice and prevent its recurrence will be taken in the near future.

As far as figures go 1930 would seem to have been a period of inactivity in respect to the provision of housing accommodation. During the year, however, the report on the housing in the burgh compiled by the Medical Officer of Health and Sanitary Inspector in 1928 produced its first result. On tenth March a representation was made by the Medical Officer of Health relating to the Central Area, and in consequence of that on 18th March the Corporation passed a resolution declaring that area an Unhealthy Area, and resolving that an Improvement Scheme ought to be made. While the preliminary work in connection with this proposed scheme was being carried out, the Housing (Scotland) Act, 1930, was passed, and this necessitated certain changes in the procedure. A second representation by the Medical Officer of Health under the new act was, therefore, made on 15th September, and on 29th September the Corporation passed a resolution declaring the Central Area to be a Clearance Area in which all the buildings were to be demolished.

The preliminary survey and other work in connection with the clearance of the area has been of great volume, and much time has been spent upon it during the year.

The housing problem is still with us and is still unsolved. Slum clearance is still the most clamant part of that problem, and will remain so until industrial and economic conditions very materially improve. A definite and important step, however, has now been taken in the decision to clear out the Central Area. The machinery has been set in motion, and the work will be carried through. The procedure, however, is complicated and tedious, the difficulties will be many, and much patience will be required.

The new Housing Act of 1930 would appear to be distinctly helpful to Local Authorities in dealing with housing wants, but the value of its provisions has still to be proved before final

judgment can be made. As far as can be estimated at present, however, the new act seems to have brought a little nearer to realisation the ideal of a decent house at a modest rent. Time will tell.

The clearance of the Central Area will not finish the work to be done; indeed it should be looked upon only as a good start on a big job.

TOWN PLANNING—

On 20th August, 1929, the Corporation passed a resolution to prepare a Town Planning Scheme for the burgh under the Town Planning (Scotland) Act, 1925. A draft scheme has now been prepared, but at the end of the year it had not been finally approved by the Local Authority.

FACTORIES AND WORKSHOPS.

At the end of the year there were 232 workshops on the register kept by the Local Authority. Five notices were received from H.M. Inspector of Factories—one under section 5, and the others under sections 97-100 of the Factory and Workshop Act, 1901. The matters referred to in these notices were all satisfactorily adjusted.

Four hundred and ninety-six visits of inspection to workshops and 156 to workplaces were made by the Sanitary Inspector, and in the case of fourteen workshops and eleven of the workplaces conditions contrary to the requirements of the Factory and Workshop Act, 1901, or nuisances under the Public Health (Scotland) Act, 1897, were discovered as follows:—

(1) Want of cleanliness,	-	-	-	3
(2) Unsuitable or defective sanitary conveniences,	10			
(3) Other nuisances,	-	-	-	12

In connection with these defects, 28 notices were served on occupiers, and also on the owners where work of a structural nature was involved. Satisfactory remedy was made in each case.

As required by section 107 (1) (c) of the Factory and Workshop Act, one list involving 118 outworkers, and one involving 88 outworkers were received in February and August, respectively, while 12 intimations were transmitted to other local authorities in the former, and 14 in the latter month.

The work performed by these outworkers comprised chiefly knitting and crocheting, and their homes were satisfactory in all cases.

WATER SUPPLY.

The water supply of the burgh proved adequate for domestic, trade and mill power uses during the year, and the quarterly analyses made by the Public Analyst showed that it was in all respects suitable for domestic purposes.

The minimum amount in store occurred on 26th July, when there was 135 days' supply in the reservoirs.

DRAINAGE.

The drainage of the burgh during the year was very satisfactory. There was no flooding sufficient to cause inconvenience or damage.

The new intercepting sewer in Kelly Street, between South Street and Brisbane Street, was completed during the year, and its object of relieving pressure in the Nelson Street sewer was apparently achieved. An overflow from the public sewer in Stanners Street into the Cartsburn was constructed with the object of preventing a recurrence of the flooding in Main Street, and this operation appears to have been successful. A new drain was also laid by the Railway Company in their ground at Inchgreen, and a recurrence of the flooding in that area did not materialise.

RIVERS POLLUTION.

No complaints regarding the pollution of streams were received, and no action was deemed necessary during the year.

It was decided to carry out the culverting of the Dellingburn to the sea wall, and the work was begun in August.

NUISANCES.

No medical certificates were required in connection with nuisances as defined in section 16 of the Public Health (Scotland) Act, 1897.

METEORIOLOGY.

I am indebted to Mr MacAlister, M.Inst., C.E., Engineer and Superintendent of Water Works, for the following meteorological data relating to 1930. The readings were all taken at the Prospecthill filters which are situated about two hundred feet above sea level:—

MONTH.	Air Pressure. Mean Reading at Station Level and 32° C.	Air Temperature. Mean of		Rainfall in inches.	Number of days on which .01 or more fell.	Humidity per cent.
		Maximum.	Minimum.			
January, -	29.230	44.0	35.8	10.61	26	86
February, -	29.940	39.8	32.0	0.69	7	87
March, - -	29.506	44.0	35.3	4.40	20	85
April, - -	29.586	51.8	40.7	2.53	12	75
May, - -	29.681	57.7	43.4	2.96	12	74
June, - -	29.677	64.4	50.0	3.70	13	73
July, - -	29.533	63.7	53.3	3.04	19	79
August, -	29.522	63.1	52.8	6.82	27	85
September,	29.656	59.5	49.4	4.58	13	82
October, -	29.412	53.4	44.9	10.17	29	83
November,	29.484	46.3	36.8	8.84	20	85
December, -	29.490	44.5	37.3	6.97	23	90

The total rainfall amounted to 65.31 inches, which is to be compared with 67.64 inches in 1929 and 63.62, the mean of the 40 years 1890-1929.

PROPAGANDA.

The publication of the monthly health bulletins in the "Greenock Telegraph" was continued during the year, and occasion was taken to draw attention in them to any matter of importance in connection with epidemic disease and its prevention.

The supply of leaflets containing simple health information was maintained at the Health Department Office, and these were taken advantage of by the public. Numerous posters depicting the various aspects of disease prevention were also displayed during the year.

Under the auspices of the Greenock and District Branch of the Scottish Health League four meetings were held. In the early part of the year lectures were given by Mrs Menzies Campbell, M.B., Ch.B., on "Diet in relation to Health," and by the Medical Officer of Health on "The Troubles of the Consumptive." In November a debate "Does Modern Hustle Help or Harm" was held, and a lecture "Relation between Teeth and Good Health" was delivered by Mr Menzies Campbell, L.D.S., D.D.S., F.R.S.E. These meetings were very well attended, and fulfilled a very useful place in the propaganda programme of the department.

APPENDIX.

TABLE I.—VITAL STATISTICS.

(A) BIRTHS, DEATHS AND MARRIAGES

	Numbers Registered in District.	Transfers.		Corrected Number.		
		Out.	In.	Both Sexes.	Males.	Females.
Total Births (including Illegitimate), - - -	1,878	31	41	1,888	938	950
Illegitimate Births, -	93	11	19	101	48	53
Marriages, - - -	530			...		...
Deaths, - - -	1,142	63	46	1,125	614	511

(B) DEATHS AND DEATH-RATES IN AGE GROUPS.

AGES.	Population Estimated at Mid-Year by M.O.H.	Number of Deaths.	Percentage of Total Deaths.	Death-rate per 1000 of the Population	Average Death-rate per 1000 of population during preceding 5 years
Under 1 Year, - -	2,191	181	16.09	82.61	95.01
From 1—5 Years, -	7,325	96	8.53	13.10	16.41
“ 5—10 “ -	8,741	34	3.02	3.88	2.60
“ 10—15 “ -	8,165	15	1.33	1.83	
“ 15—25 “ -	15,414	67	5.96	4.34	9.09
“ 25—35 “ -	12,662	52	4.62	4.10	
“ 35—45 “ -	10,412	66	5.87	6.33	
“ 45—55 “ -	8,422	98	8.71	11.63	
“ 55—65 “ -	5,108	154	13.69	30.14	87.85
“ 65—75 “ -	2,717	195	17.34	71.77	
“ 75—85 “ -	880	131	11.64	148.86	
“ 85 and over, -	94	56	3.20	382.97	
TOTAL, -	82,131	1,125	100.00	13.69	14.41

TABLE III.—CAUSES OF DEATH—PUBLIC HEALTH DISTRICT'S—MEDICAL OFFICER
OF HEALTH, 1930.

CAUSES OF DEATH.	District.												Total.	Death-rate per 1000 of Population.
	A.			B.			C.			D.				
	M.		T.	M.		T.	M.		T.	M.		T.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.		
Enteric Fever,	-	2	2	-	-	-	-	2	2	-	-	4	4	0.0487
Measles,	-	7	12	-	-	-	-	3	10	-	-	11	28	0.3409
Scarlet Fever,	-	1	1	-	-	-	-	2	4	-	-	3	7	0.0852
Whooping Cough,	-	8	10	-	-	-	-	2	2	-	-	11	15	0.1825
Diphtheria,	-	1	2	-	-	-	-	1	3	-	-	3	5	0.0609
Influenza,	-	4	6	-	-	-	-	3	7	-	-	10	20	0.2435
Encephalitis Lethargica,	-	1	1	-	-	-	-	-	-	-	-	-	2	0.0244
Cerebro-Spinal Meningitis,	-	-	-	-	-	-	-	-	-	-	-	-	2	0.0365
Other Epidemic Diseases,	-	1	1	-	-	-	-	-	-	-	-	-	3	0.0365
Tuberculosis of Respiratory System,	-	13	29	-	-	-	-	11	26	-	-	35	72	0.8766
Tuberculous Meningitis,	-	5	5	-	-	-	-	2	6	-	-	12	15	0.1825
Tuberculosis of Intestines and Peritoneum,	-	1	1	-	-	-	-	1	1	-	-	3	4	0.0487
Other Tuberculous Diseases,	-	-	1	-	-	-	-	2	2	-	-	2	6	0.0731
Malignant Tumours,	-	16	33	-	-	-	-	14	27	-	-	34	111	1.3515
Rheumatic Fever,	-	1	1	-	-	-	-	1	1	-	-	2	4	0.0487
Meningitis (not Cerebro-Spinal or Tuberculous)	-	2	2	-	-	-	-	1	8	-	-	6	11	0.1339
Apoplexy,	-	12	22	-	-	-	-	10	25	-	-	26	44	1.1080
Heart Disease,	-	7	11	-	-	-	-	18	13	-	-	29	44	1.2297
Diseases of Arteries,	-	3	1	-	-	-	-	24	38	-	-	21	101	1.2297
Bronchitis,	-	9	21	-	-	-	-	3	2	-	-	10	14	0.1705
Pneumonia (all forms),	-	21	43	-	-	-	-	12	25	-	-	35	68	0.8279
Other Diseases of Respiratory System,	-	2	5	-	-	-	-	11	32	-	-	60	104	1.2663
Diarrhoea and Enteritis (under 2 years),	-	5	10	-	-	-	-	6	2	-	-	8	13	0.1583
Appendicitis,	-	1	1	-	-	-	-	3	3	-	-	1	18	0.2192
All Diseases of Liver (not Malignant),	-	1	2	-	-	-	-	1	-	-	-	3	5	0.0852
Nephritis, Acute and Chronic,	-	4	5	-	-	-	-	2	4	-	-	2	9	0.1095
Puerperal Fever,	-	-	-	-	-	-	-	-	6	-	-	5	7	0.2313
Other Dis. and Acc. of Preg. and Parturition,	-	4	4	-	-	-	-	-	3	-	-	-	9	0.1095
Diseases of Early Infancy and Malformations,	-	24	33	-	-	-	-	7	12	-	-	6	33	1.1202
Suicide,	-	1	1	-	-	-	-	2	3	-	-	2	4	0.0731
Other Violent Deaths,	-	9	12	-	-	-	-	11	13	-	-	3	11	0.5236
Other Defined Diseases,	-	32	39	-	-	-	-	18	59	-	-	23	102	2.5203
Causes Ill-defined or Unknown,	-	1	4	-	-	-	-	3	2	-	-	5	9	0.1705
ALL CAUSES,	-	191	366	109	96	205	213	150	363	101	90	191	511	13.6972

TABLE IV.—POPULATION AND PRINCIPAL RATES
PER 1,000—REGISTRAR GENERAL.—1881-1930.

Year.	Population. Death-rate.		Birth-rate.	Infantile Mortality Rate.	Tuberculosis Death-rate.	
					Pulmonary.	Non- Pulmonary.
1881	69,492	21.94	39.00	123	2.77	1.20
1882	70,520	22.55	39.80	133	2.36	1.10
1883	71,562	24.96	39.76	148	2.06	0.85
1884	72,621	20.56	39.18	128	2.43	0.80
1885	73,695	20.98	32.31	163	2.14	0.89
1886	74,795	17.25	33.42	117	1.91	0.72
1887	75,892	19.82	29.85	148	1.89	0.72
1888	77,015	15.79	28.68	106	1.64	0.66
1889	66,489	20.33	34.44	132	2.06	0.61
1890	66,175	21.44	34.78	132	2.68	0.78
1891	63,432	22.54	32.55	163	1.82	0.56
1892	63,027	19.74	35.83	116	2.01	0.65
1893	62,713	20.90	32.96	134	1.59	0.65
1894	62,400	19.23	32.20	133	2.09	0.49
1895	62,090	23.06	33.84	152	1.62	0.82
1896	61,781	17.84	33.08	120	1.76	0.55
1897	61,475	22.17	33.05	159	2.06	0.68
1898	61,170	21.38	35.20	136	2.07	0.83
1899	67,269	19.64	31.01	142	1.70	0.83
1900	67,776	19.18	32.50	130	1.59	0.84
1901	68,264	19.45	29.84	132	1.46	0.90
1902	68,756	19.85	31.74	122	1.81	0.94
1903	69,252	18.93	29.56	144	1.68	0.80
1904	69,749	17.65	30.09	123	1.20	0.93
1905	70,253	18.78	30.49	116	1.31	1.05
1906	70,758	17.89	32.21	127	1.34	1.25
1907	71,269	17.79	30.25	104	1.54	1.08
1908	71,783	17.00	30.31	118	1.21	1.12
1909	73,214	15.01	26.73	95	1.09	1.09
1910	74,667	18.87	28.85	129	1.16	0.96
1911	75,028	18.44	30.73	113	1.50	0.95
1912	76,337	18.70	31.30	119	1.44	1.02
1913	77,156	18.22	31.03	116	1.47	0.86
1914	77,642	18.04	32.84	108	1.00	0.91
1915	77,695	20.14	29.49	145	1.15	0.91
1916	78,642	17.10	29.20	109	1.42	0.75
1917	79,299	15.10	26.88	92	1.28	0.83
1918	79,574	17.88	26.52	110	1.10	0.82
1919	79,613	17.25	28.73	99	0.94	0.59
1920	80,436	16.51	33.34	104	1.06	0.69
1921	81,120	14.59	30.15	93	1.01	0.54
1922	81,370	19.17	27.68	149	1.03	0.68
1923	81,522	12.94	27.04	77	0.99	0.54
1924	82,096	15.22	24.16	113	1.00	0.44
1925	81,200	14.32	24.54	107	0.85	0.52
1926	81,558	13.74	23.87	90	0.98	0.34
1927	80,889	13.26	22.17	89	0.87	0.44
1928	79,204	15.74	24.05	120	0.80	0.34
1929	81,844	15.57	22.22	111	1.04	0.26
1930	82,131	13.69	22.98	96	0.88	0.30

TABLE V.—SOURCES OF NOTIFICATIONS OF INFECTIOUS DISEASES—1930.

DISEASE.	BY WHOM REPORTED.						Total.
	House-holders.	House-holders & Doctors.	Doctors.	Public Health Officers.	School Medical Officers.	Midwives.	Registrars.
Pneumonia, - - - - -	..	..	79	..	..	..	10
Enteric Fever, - - - - -	..	..	27	..	..	..	..
Diphtheria, - - - - -	..	10	119	..	..	..	..
Scarlet Fever, - - - - -	..	26	271	..	..	..	..
Puerperal Fever, - - - - -	..	..	4	..	..	..	..
Puerperal Pyrexia, - - - - -	..	..	39	..	..	..	..
Erysipelas, - - - - -	..	1	54	..	..	..	..
Cerebro-Spinal Meningitis.	..	..	6	..	..	..	..
Acute Poliomyelitis,	..	..	..	..	..	..	..
Measles, - - - - -	2,031	..	3	10	2	..	15
Chickenpox, - - - - -	57	156	216	2	9	..	..
Whooping Cough, - - - - -	497	..	6	1	2	..	..
Encephalitis Lethargica,	..	..	1	..	..	..	..
Malaria, - - - - -	..	..	2	..	..	..	..
Dysentery, - - - - -	..	..	1	..	..	..	..
Ophthalmia Neonatorum, - - - - -	..	..	12	..	..	..	..
TOTAL, - - - - -	2,585	193	831	14	13	18	32
							3,716

TABLE VI.—MONTHLY INCIDENCE OF INFECTIOUS DISEASES—1930.

MONTH.	Malaria.	Diphtheria.	Euccephalitis Lethargica.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Puerperal Fever.	Puerperal Pyrexia.	Cerebro-Spinal Meningitis.	Acute Anterior Polyomyelitis.	Pneumonia.	Chickenpox.	Measles.	Whooping Cough.	Ophthalmia Neonatorum.	Dysentery.	Total.
January,	...	8	1	...	24	...	...	2	...	...	7	53	15	41	11	...	162
February,	...	9	...	4	31	...	...	2	...	...	12	33	82	21	11	...	205
March,	16	...	4	24	1	...	1	1	...	18	65	734	63	8	...	936
April,	6	...	3	17	...	...	2	...	...	7	45	773	85	4	...	942
May,	17	...	2	16	...	...	...	1	...	6	38	316	84	2	...	487
June,	8	...	3	17	...	...	1	...	...	9	9	90	50	2	...	186
July,	5	...	6	15	9	...	1	1	...	5	5	16	13	3	...	80
August,	...	12	...	7	19	7	...	3	2	...	2	26	11	32	2	...	124
September,	...	16	...	5	38	9	...	4	1	...	3	18	11	15	2	...	119
October,	2	20	...	6	43	2	...	1	...	...	5	33	5	18	6	...	141
November	...	8	...	2	23	...	...	4	...	...	2	40	4	49	2	...	134
December,	...	4	...	13	30	2	...	5	...	...	16	76	4	42	7	1	200
TOTAL,	2	129	1	55	297	27	4	30	6	...	89	441	2,061	513	60	1	3,716

TABLE VII.—DISTRICT INCIDENCE OF INFECTIOUS DISEASES WITH NUMBER OF REMOVALS TO HOSPITAL—1930.

DISTRICT.	CASES.	Pneumonia.	Enteric Fever	Diphtheria.	Scarlet Fever.	Puerperal Fever.	Puerperal Pyrexia.	Erysipelas.	Cerebro-Spinal Meningitis.	Ophthalmia Neonatorum.	Measles.	Chickenpox.	Whooping Cough.	Encephalitis lethargica.	Malaria.	Dysentery.	Total.
A.	{ Ascertained, Removed,	37	10	*53	67	3	12	17	1	29	748	148	319	1	1	...	1,446
B.	{ Ascertained, Removed,	4	9	52	66	3	6	1	...	1	8	1	8	...	...	...	159
C.	{ Ascertained, Removed,	16	7	18	76	...	8	7	2	9	372	77	52	...	1	...	645
	{ Ascertained, Removed,	...	5	18	76	...	4	2	1	...	7	1	1	...	...	...	115
	{ Ascertained, Removed,	27	6	44	114	1	9	22	3	20	733	125	120	...	...	...	1,224
	{ Ascertained, Removed,	4	4	44	111	...	7	5	2	...	15	1	3	...	...	...	198
D.	{ Ascertained, Removed,	8	4	14	40	...	1	9	...	2	207	88	21	...	...	...	394
	{ Ascertained, Removed,	...	3	14	33	...	1	1	...	...	3	9	...	...	...	...	64
	{ Ascertained, Removed,	1	...	...	...	...	...	...	...	...	1	3	1	...	...	1	7
	{ Ascertained, Removed,	1	...	...	...	...	...	...	...	...	1	3	1	...	...	1	7
TOTAL,	{ Ascertained, Removed,	89	27	129	297	4	30	55	+6	60	2061	441	513	1	2	1	3,716
		9	23	128	286	3	18	9	3	1	34	15	13	...	...	1	543

* 1 died before removal.

+ 5 ascertained in Greencrook Royal Infirmary.

10 cases had diphtheria and measles.

14 cases had measles and whooping cough.

1 case had chickenpox and measles.

1 case had scarlet fever and chickenpox.

1 case had scarlet fever and whooping cough.

(Each of these 27 patients has thus been entered as 2 cases in the Table).

TABLE VIII—HOUSE INCIDENCE OF INFECTIOUS DISEASES WITH NUMBERS
TREATED AT HOME AND IN HOSPITAL—1930.

DISEASE.	TREATED AT HOME IN HOUSES OF APARTMENTS										TREATED IN HOSPITAL FROM HOUSES OF APARTMENTS										TOTALS.						
	One.	Two.	Three.	Four.	Five and over.	Semi-detached.	Larkfield Hospital.	Royal Infirmary.	Children's Hospital.	Smithson Hospital.	Maternity Hospital.	Total at Home.	One.	Two.	Three.	Four.	Five and over.	Semi-detached.	Self-Contained.	Larkfield Hospital.		Royal Infirmary.	Children's Hospital.	Gateside Hospital.	Smithson Hospital.	Ships.	Total in Hospital.	Grand Total.
Enteric Fever,	...	3	...	...	...	...	1	...	...	...	...	4	...	11	7	12	...	...	...	...	3	...	1	...	...	23	27
Diphtheria, -	...	1	...	...	...	...	...	...	...	...	...	1	...	24	53	40	...	...	...	...	3	...	1	1	...	128	129
Scarlet Fever,	...	...	1	...	...	...	...	...	...	...	...	11	...	24	129	87	...	...	...	...	5	...	...	4	...	286	297
Puerperal Fever,	...	...	...	...	...	...	...	...	...	...	1	1	...	...	3	...	...	...	...	...	...	...	...	...	...	3	4
Puerperal Pyrexia,	...	9	...	...	...	...	...	...	...	1	2	12	...	1	11	...	...	...	...	...	5	...	...	...	...	18	30
Erysipelas, -	2	23	6	10	1	2	2	...	...	...	...	46	...	1	4	1	...	...	...	...	...	...	1	...	...	9	55
Pneumonia.	6	39	18	2	4	...	...	9	1	1	...	80	...	1	5	2	...	...	...	...	...	...	...	...	...	9	89
Encephalitis Lethargica,	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Measles,	309	1133	417	98	41	11	16	...	2	...	...	207	...	6	10	1	...	1	2	...	9	...	1	2	1	34	2061
Whooping Cough,	80	269	131	16	1	...	3	...	...	...	...	500	...	1	9	...	...	...	...	...	1	...	...	1	1	13	513
Chickenpox, -	35	192	123	26	14	15	14	1	6	...	...	426	...	1	2	...	...	...	...	1	...	9	...	3	...	15	441
Ophthalmia Neonatorum,	7	48	1	...	...	...	...	...	1	...	2	59	...	...	1	...	...	...	...	...	...	...	...	...	...	1	60
Cerebro-spinal Meningitis,	...	...	...	...	...	...	...	3	...	...	...	3	...	1	1	...	...	...	...	...	2	...	...	...	...	3	6
Malaria, -	...	1	1	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
Dysentery, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
TOTAL,	439	1719	698	154	63	31	39	1	12	10	2	5	3173	45	235	143	28	14	8	8	225	5	2	17	4	7543	3716

TABLE IX.—MONTHLY INCIDENCE AND PERCENTAGE
MORTALITY RATE OF
MEASLES AND WHOOPING COUGH—1930.

MONTH.	MEASLES.			Deaths.	Percentage of Deaths to Cases ascertained.	WHOOPING COUGH.			Deaths.	Percentage of Deaths to Cases ascertained.
	With Medical Attendance.	Without Medical Attendance.	Total.			With Medical Attendance.	Without Medical Attendance.	Total.		
January, ...	4	11	15	...	...	24	17	41	...	...
February, ...	53	29	82	1	1.21	5	16	21	1	4.76
March, ...	438	296	734	7	0.95	33	30	63	2	3.17
April, ...	443	330	773	11	1.42	33	52	85	5	5.88
May, ...	159	157	316	6	1.89	24	60	84	3	3.33
June, ...	63	27	90	1	1.11	27	23	50	2	4.00
July, ...	5	11	16	2	12.50	8	5	13	1	7.69
August, ...	5	6	11	...	...	9	23	32	...	...
September, ...	5	6	11	...	...	4	11	15	...	...
October, ...	2	3	5	...	...	10	8	18	...	...
November, ...	1	3	4	...	...	24	25	49	...	...
December, ...	1	3	4	...	...	14	28	42	1	2.38
TOTAL	1,179	882	2061	28	1.35	215	298	513	15	2.92

TABLE X.—INFECTIOUS DISEASES RATES 1900-1930.

YEAR.	SCARLET FEVER.			DIPHTHERIA.			MEASLES.			WHOPPING COUGH.		
	Incidence rate per 1000.	Death-rate per 1000.	Case mortality rate per cent.	Incidence rate per 1000.	Death-rate per 1000.	Case mortality rate per cent.	Incidence rate per 1000.	Death-rate per 1000.	Case mortality rate per cent.	Incidence rate per 1,000.	Death rate per 1,000.	Case mortality rate per cent.
1900	2.55	0.17	6.93	1.19	0.41	34.56	5.48	0.13	2.41	9.42	1.09	11.58
1901	7.92	0.42	5.36	8.93	0.17	19.67	10.82	0.35	3.24	1.87	0.36	19.53
1902	7.79	0.85	11.00	1.06	0.43	41.09	26.44	0.49	1.87	1.26	0.13	10.34
1903	2.33	0.11	4.93	0.54	0.12	23.68	0.66	0.02	4.34	6.55	1.02	15.63
1904	1.07	0.07	6.66	1.17	0.27	23.17	30.28	0.83	2.74	3.59	0.32	9.16
1905	2.81	0.32	11.61	0.21	0.21	24.19	31.31	0.82	2.63	5.50	0.76	13.95
1906	1.92	0.08	4.41	0.70	0.12	18.00	4.04	0.12	3.14	2.54	0.28	11.11
1907	2.16	0.05	2.59	0.75	0.14	18.51	19.68	0.46	2.35	3.70	0.68	18.56
1908	0.97	0.01	1.42	0.72	0.16	23.07	14.76	0.58	3.96	3.63	0.47	13.02
1909	2.89	0.04	1.41	1.05	0.13	12.98	1.73	0.02	3.16	4.73	0.65	13.83
1910	5.02	0.14	2.93	1.27	0.18	14.73	38.45	1.21	3.16	3.87	0.45	11.76
1911	5.18	0.18	3.59	1.94	0.09	9.85	4.45	0.17	3.89	5.85	0.42	7.28
1912	10.02	0.49	4.96	1.21	0.13	10.75	19.93	0.66	3.55	4.12	0.36	8.88
1913	5.59	0.24	4.39	1.03	0.18	17.50	19.99	0.41	2.07	9.40	0.63	6.74
1914	2.65	0.05	1.94	1.76	0.12	7.29	11.86	0.33	2.82	4.22	0.33	7.92
1915	1.90	0.11	6.08	1.72	0.16	9.70	14.32	0.65	4.58	9.38	0.73	7.81
1916	3.73	0.76	2.04	1.61	0.19	11.81	17.16	0.95	5.55	0.72	0.05	7.01
1917	2.74	0.06	2.29	1.23	0.12	10.20	10.12	0.20	1.99	11.43	0.80	7.05
1918	1.36	0.01	0.91	0.70	0.03	5.35	10.19	1.25	12.33	4.53	0.33	7.47
1919	3.95	0.06	1.58	1.10	0.03	3.40	15.26	0.32	2.13	2.86	0.16	6.91
1920	1.47	0.04	3.36	1.28	0.07	5.82	5.71	0.24	4.34	6.88	0.27	3.97
1921	1.31	0.01	0.93	1.76	0.07	4.19	3.69	0.00	0.00	0.62	0.00	0.00
1922	1.35	0.01	0.90	1.04	0.08	8.23	36.32	2.17	5.98	18.31	0.98	5.36
1923	4.90	0.07	1.50	1.37	0.07	5.35	6.31	0.14	2.33	0.41	0.02	5.88
1924	2.64	0.06	2.30	1.79	0.06	3.40	23.02	0.59	2.59	15.87	0.54	3.45
1925	1.21	0.01	1.01	2.11	0.09	4.65	1.07	0.00	0.00	6.83	0.39	5.76
1926	3.85	0.00	0.00	3.33	0.13	4.04	24.57	0.46	1.89	0.71	0.01	1.72
1927	3.48	0.06	1.77	3.20	0.03	1.15	7.76	0.02	0.31	5.24	0.09	1.88
1928	0.84	0.01	1.49	2.91	0.17	6.06	29.49	1.02	3.46	8.53	0.51	6.06
1929	2.02	0.00	0.00	2.41	0.07	3.03	0.52	0.02	4.64	6.25	0.45	7.44
1930	3.61	0.08	2.35	1.57	0.06	3.87	25.09	0.34	1.35	6.24	0.18	2.92

